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Full Name of Author — Nom complet de l'auteur
GLENDA MAE HILSENTEGER

Date of Birth — Date de naissance
APRIL 26, 1949

Country of Birth — Lieu de naissance
CANADA

Permanent Address — Résidence fixe
11763 - 37 A AVENUE EDMONTON, ALBERTA T6J 0K1

Title of Thesis — Titre de la thèse
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1983

Name of Supervisor — Nom du directeur de thèse
DR. JANIS BLAKEY

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MOTHER'S SUPPORT GROUP PROGRAM: AN INQUIRY

by

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A THESIS
SUBMITTED TO THE FACULTY OF GRADUATE STUDIES AND RESEARCH
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Glenda M. Hilsenteger

11763 - 37 A Avenue
Edmonton, Alberta.

Dated June 22, 1983

THE UNIVERSITY OF ALBERTA

FACULTY OF GRADUATE STUDIES AND RESEARCH

The undersigned certify that they have read, and recommend to the Faculty of Graduate Studies and Research, for acceptance, a thesis entitled MOTHER'S SUPPORT GROUP PROGRAM: AN INQUIRY submitted by Glenda Mae Hilsenteger in partial fulfilment of the requirements for the degree of Master of Education.

James Blakey

Supervisor

Laura Everett Turner

Date June 22, 1983

ABSTRACT

The purpose of this inquiry was to investigate the nature of a Mother's Support Group Program in Edmonton, Alberta. The data were collected in four community based program settings using questionnaire and participant observation techniques.

The subjects involved in this program consisted of 42 program participants and four group leaders. The majority of participants were full-time homemakers who ranged in age from 22 to 42 years and were first-time mothers from middle class backgrounds. All program participants were enrolled in the program on a voluntary basis.

Two questionnaires were designed to obtain the views of the program participants and leaders and were completed following the conclusion of the twelve week program. In addition, the researcher attended each of the four individual programs a total of four times for the purpose of collecting data using participant observation techniques. The information was used to supplement the data received from the questionnaires.

The findings of the study indicated that the Mom's Group Program was a beneficial experience for the participants. The program provided the mothers with an opportunity for a social outing and a means to receive practical, relevant information concerning parenting. In addition, the program provided a supportive network of individuals to relate to during a time of transition. The evidence confirms that the mothers felt more comfortable in their role as a parent and suggests that both mothers and children benefited as a result of attending the program.

The study concludes the program participants and group leaders valued the assistance offered by the Mom's Group Program. The spontaneous nature of the program appeared to be well suited to meeting the needs of both mothers and program leaders. Although further evaluation is required to investigate the effects of parent support groups and parent education methods, the program appears to be an effective means of providing assistance for parenthood which will help parents to experience more pleasure in family living.

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I am especially grateful to the administrators, program leaders, mothers, and children involved in the Mother's Support Group Program. Their participation and assistance allowed for the collection of data for this study.

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TABLE OF CONTENTS

Chapter Page

I THE PROBLEM 1
    Introduction................................ 1
    Statement of Purpose....................... 4
    Limitations of the Study................... 5
II A REVIEW OF THE LITERATURE..................... 8
    Issues Faced by Families................... 8
        The Myth of Motherhood................. 8
        The Arrival of a Newborn............... 10
        Status of Motherhood................... 11
        Social Isolation and Loss of Self-Esteem. 12
        Modern Child-Rearing Literature........ 13
    Parent Education........................... 16
        Benefits of Parent Education........... 16
        Types of Parent Education Programs..... 17
        Group Discussion: A Valuable Resource.... 18
        The Importance of Social Support Systems. 19
        "Packaged" Parent Education Programs..... 21
III METHODOLOGY................................... 24
    Research Design............................ 24
    Questionnaires............................. 26

Pilot Study.. 26
Participant Observation............................ 27
The Sample... 29
Data Collection.................................... 29
  Quantitative Data................................ 30
  Qualitative Data................................. 31
Data Analysis...................................... 34
IV MOTHER'S SUPPORT GROUP PROGRAM: PHILOSOPHY, PROGRAM, SETTINGS, AND PARTICIPANTS......... 35
Introduction....................................... 35
Program Philosophy................................. 35
Program Outline.................................... 37
The Program.. 38
Program Settings................................... 42
  A Church... 42
  A Home... 43
  An Office Building............................... 44
  An Elementary School............................. 45
Program Leaders and Participants................... 46
  Leaders.. 46
  Participants..................................... 46
Summary.. 47
V A DAY WITH MOMS.................................. 49
Introduction....................................... 49
A Day with Moms.................................... 50

Discussion.............................. 75
Concluding Comments........................ 78
VI FINDINGS OF THE INQUIRY........................ 80
Introduction.............................. 80
Participant Questionnaire.................. 81
Part A: Evaluation of the Mom's Group.... 83
Part B: General Information..............141
Participant Observation Data..............156
Concerns of Mothers.......................156
Anticipation..........................157
Renewing Equilibrium..................158
Selflessness..........................160
Everyone's an Expert..................163
Leader's Evaluation.......................167
VII SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS....174
The Problem...............................174
Findings..................................176
Implications and Conclusions..............184
The Mom's Group Program...............184
Supportive Program Elements...........185
Future Programming....................188
Recommendations...........................189
Future Research.......................189
Mom's Group Program...................190
Concluding Statement......................192

REFERENCES.......................................193

APPENDIX A

Participant Evaluation Questionnaire.........197

APPENDIX B

Leader Evaluation Questionnaire..............210

APPENDIX C

Covering Letter..............................218

APPENDIX D

Letter of Reminder...........................219

APPENDIX E

Second Letter of Reminder....................220

LIST OF TABLES

Table		Page
1	Percentage of Responses to Questionnaires	82
2	Major Positive Effects of the Program	84
3	Areas of Concern About the Program	88
4	Suggested Changes for the Program	91
5	Rating the Helpfulness of the Program	93
6	Meeting with the Mom's Group Once a Week	95
7	Meeting with the Mom's Group for 12 Weeks	96
8	Finding Out About the Program	98
9	Recommending the Program to Others	99
10	Rating the Group Leader-Knowledge of Material Presented	101
11	Rating the Group Leader-Leadership Style and Techniques	102
12	Rating the Group Leader-Ability to Create a Comfortable Atmosphere	104
13	Rating the Group Leader-Overall Competency	106
14	Reading Smiles and Tears	107
15	Rating the Helpfulness of Smiles and Tears	109
16	Using the Child-Care Services	111
17	Rating the Helpfulness of the Child-Care Services	113

18 Comparing Information From the Mom's Group With Other Sources 115
19 Talking About What Happens in a Mom's Group With Others Living in the Household 118
20 Talking About What Happens in a Mom's Group With Friends or Relatives 120
21 Turning for Help in Making Decisions 121
22 Most Important Needs Since the Birth of the Baby 123
23 Learning About the Development and Care of Children 125
24 Feeling More Comfortable in Role as a Parent 127
25 Rating Information Provided in the Mom's Group 128
26 Hoping to Gain From a Mom's Group 134
27 Meeting Expectations About the Mom's Group 135
28 Helpful Information and Support for the Future 138
29 Sessions Attended 142
30 Attended a Course Like the Mom's Group Before 143
31 Present Role 145
32 Number of Children Being Raised in the Home 146
33 Number of Children Under 3 Years of Age 147

34 Ages of Self and Mate 149

35 Being a Home Owner 152

36 Length of Time Living in Present Community 153

37 Total Yearly Family Income Before Taxes 155

CHAPTER I

THE PROBLEM

Introduction

Parents are the first and most significant educators in a child's life. They influence their child's behavior and direct or mediate their experiences (Katz, Glockner, Goodman & Spencer, 1977). Current research strongly emphasizes the impact of the first three years of life on cognitive and emotional development (Beck, 1967; Bronfenbrenner, 1975; Painter, 1971; White, 1971).

The concept of the infant as a helpless organism is no longer supported. Research indicates that the infant enters the world with a multitude of specialized and purposeful behaviors which are sophisticated and socially influential (Brazelton, 1976; Huntington, 1979; Kaiser & Haydon, 1977). Thus, education does not begin at the point the child first enters the school system, but is a lifelong process that begins prior to birth. To begin to look at educational development when a child is two years of age is already too late, particularly in the area of social skills and attitudes (White, 1975). It is crucial, therefore, that parents recognize the role they have as educators of their children and that they receive information and support to assist them in this important task.

In recognition of the importance of parents as educators, parent education programs have become a popular means of educational intervention. Such programs have ultimately been designed to promote the healthy and effective development of the child through the use of the parent as a primary agent of change.

Members of the professional community largely support and encourage the development of parent education programs although there are no universally agreed upon methods for educating parents. Research on the effectiveness of parent education has been inadequate, both in terms of quality and quantity (Croake & Glover, 1977; Rinn & Markle, 1977). The limited number of studies relating to the evaluation of parent education are basically descriptions of the various programs with no attempt to measure their impact.

Currently, increased emphasis is being placed on a socio-ecological perspective of the family. The family is viewed as an open system which is responsive to and dependent upon the environment (Bronfenbrenner, 1975; Cochran & Brassard, 1979; Powell, 1979). Social, political, economical, and ecological influences combined with a family's interactions with such influences affect the quality of family life. A family faced with many environmental stresses may not have sufficient energy to successfully deal with family concerns. In addition, social policies and practices of professionals and institutions established to meet environmental needs are often unavailable or not helpful (Schaefer, 1976). The healthy development of children requires programs and policies which support parents and their families in a community context.

In response to this trend, small scale, informal post-partum groups have become popular. Such groups are based on the premise that the first three years of parenting are particularly stressful and are a time when parents are especially eager for information and in need of support. To date, these groups have not been systematic in their approach and the effects have not been documented (Wandersman & Wandersman, 1977). Professional books, journal articles, and research studies available on this topic are scarce.

In recent years, the concept of post-partum support groups for mothers has increased in popularity across Canada. In Alberta, most cities and some smaller communities offer such programs. These programs range from informal gatherings of parents on a regular basis to programs routinely sponsored by agencies such as the Public Health Unit or the Y.M.C.A.. In 1977, the Parent Resource Unit (formerly a branch of Alberta Social Services and Community Health), piloted a Mother's Support Group Program in Red Deer, Alberta. Following this program they developed a leader's guide and parent's handbook for Mother's Support Groups throughout the province and supported the concept of this program by providing program materials and resources, consultation, and leadership training. To date, very little formal investigation of these Mother's Support Group programs has taken place.

Statement of Purpose

The study was designed to explore a Mother's Support Group Program in Edmonton, Alberta. More specifically, this study was intended to provide insight into the following research questions:

1. What is the nature of a Mother's Support Group Program?
2. How do the program participants feel about the program?
3. How do the program leaders perceive the program?
4. What changes do the program participants recommend for future programs?
5. What changes do the program leaders recommend for future programs?

The research was intended to be exploratory in nature using both quantitative and qualitative data collection techniques. It is hoped that the findings arising from the synthesis of these two types of data will offer insight into future research needs and provide useful information for individuals or groups wishing to establish such a program within their own communities.

Limitations of the Study

1. The results of this study are not generalizable to other populations because of the very small sample and lack of randomness in the selection procedures.

2. The use of a questionnaire as a major instrument of data collection presents several limitations:

    a. The questions asked may be selected on the basis of the researcher's preconceived notions and constructs of what is important;

    b. The questioner's unconscious bias often betray themselves in subtle ways to the respondents;

    c. The questions asked may be interpreted by respondents in different ways;

    d. Some participants in the study may choose not to respond.
    (Bogdan, 1972; Feldman, 1981)

3. The following limitations of participant observation are recognized:

    a. The participant observer has an effect on the behavior of the subjects in the study and is influenced by the subjects. The influences of the observer affect the data collected;

b. Selective observation always occurs as it is impossible to observe everything;

c. Selective interpretation permeates each stage of data collection as what is observed does not imply its own meaning;

d. Selective recording typically occurs and all that is observed is never recorded;

e. All types of selection are influenced by the investigator's personal experience and cultural background.
(Bogdan, 1972; Hunter & Foley, 1976; Spradely & McCurdy, 1972)

CHAPTER II

A REVIEW OF THE LITERATURE

Issues Faced by Families

The intent of this chapter is to review the major themes present in the literature related to parenthood. This section will focus on the cultural myths of parenthood, the status of motherhood, and the resultant changes in lifestyle that tend to occur with the arrival of a newborn.

The Myth of Motherhood

The decision to have a baby has a permanent, irreversible effect on the lives of parents (The Boston Women's Health Book Collective, 1978). The rapid and radical societal changes in today's North American culture have made rearing children more difficult, particularly for women. There has been an increase in the number of single, adolescent, and working parents. The nuclear family has removed parents and children from the active, supportive group life that once flourished in the extended family (McBride, 1973) and has left children and their parents or caregivers in isolation with little societal support or assistance. Society has not acknowledged the changes within the family structure and there are few support systems to replace the former nurturing model of child-care (Huntington, 1979; Leiber, 1975).

Traditionally, motherhood is viewed as a universal, instinctive trait of all women. The mother's function is viewed as providing unconditional tender-loving-care for her children and her reward is the satisfaction of having well-behaved, happy, loving children. Motherhood is also fun, easy, ultimately fulfilling, and the natural highlight of every women's life; a myth that is difficult to transcend. Myths cause people to have high expectations of what they "should" do. Those who cannot meet a given standard, old or new, may feel frustrated, disappointed, and inadequate (Radl, 1979). Brazelton (1976) believes we have created a generation of tensely anxious, burdened young parents who, if better informed about child rearing, would find more pleasure in family life as a whole. Adequate preparation and assistance for parenthood is currently not available for most families (White, 1975).

The Arrival of a Newborn

Few parents are fully prepared for the changes in lifestyle that accompany the arrival of a newborn. The influence a newborn may have on family interaction patterns, career goals, and financial responsibilities is seldom foreseen. In addition, parents will need to come to terms with the vast responsibility of rearing a child. This lack of awareness on the part of new parents is reflected through studies which show that marital satisfaction tends to decline with the arrival of the firstborn (Barber & Skaggs, 1975; Radl, 1979; Rapoport, Rapoport, Strelitz & Kew, 1977). Disruption of the sexual relationship, chronic fatigue and exhaustion, feelings of nervousness and depression, decline in verbal communication between spouses, and decline in good humour are factors commonly associated with becoming parents for the first time. Families need time to establish a new equilibrium. This is a time when societal supports are most needed. Barber & Skaggs (1975) conclude the years of greatest parental stress are the first three years. These years have not been properly researched and are, therefore, not clearly understood.

Status of Motherhood

Perhaps the current lack of research in the area of parenting is indicative of the general lack of societal support of parenthood as an important undertaking. Parenthood is often confused and equated with motherhood. Although lip service is given to the idea that mother-work is worthy, society does not give full support to those activities which are, by definition, not gainful (Bernard, 1974). Domestic work and child care are ranked as unskilled labor of the lowest order (Barber & Skaggs, 1975; McBride, 1973). Mothers are expected to accept security and love as remuneration for one of the most difficult jobs of the adult human being. If a mother decides to enter the workforce, she is often faced with the fear and resulting guilt of failing to be a "good" mother.

Toffler (1980) suggests that if society provided mothers with financial remunerations for their efforts, the status of motherhood would increase significantly. However, if financial remuneration for mothering is not feasible, then, at the very least, mothers need recognition and support as valuable contributors to society. Too often mothers are put down, made to accept blame for family problems, or to feel guilty for their labors. They are glared at in public places if they are unable to keep their children in line, they face bored expressions if they dare to discuss children at social events, and they are held accountable for "the failures" of their offspring. Finally, many mothers in today's society experience feelings of fatigue and loneliness.

Social Isolation and Loss of Self-Esteem

The physical isolation of mothers may contribute to their loneliness and low sense of self-esteem. They are believed to be "out of the action" (Boston Women's Health Book Collective, 1978) with few adult contacts, perform repetitious and never-ending household chores, and face constant interruptions and noises of children which tend to interfere with their powers of concentration. The new mother is seldom well informed of the physical and emotional aspects of motherhood or the feelings of insecurity, fear, and guilt which may arise and which are often compounded by the common societal belief that motherhood is a matter of instinct rather than training and experience (Barber & Skaggs, 1975).

Many parents today were raised within a small, nuclear family and did not have the opportunity to take responsibility for the care of young children. Thus new parents must rely on their thoughts which are based more on memory of their own childhood experiences or cultural myths than on actual experiences with babies and young children (Boston Women's Health Book Collective, 1978). Books, magazines, movies, and television are usually not helpful. They tend to romanticize parenthood by portraying beautiful, healthy, smiling babies sitting passively in immaculate, orderly surroundings.

> The media inspired cultural notions of housework would be laughable were it not for the fact that disputes over housework can cause marital strife, resentment, anger, guilt, and loss of self-esteem. (Radl, 1979, p. 161)

In reality, parenthood is not as carefree as depicted by the media. When new mothers are faced with piles of dirty dishes and a baby who will not be pacified, the myths of motherhood can be harmful as they may lead many parents to believe something is wrong with them personally.

Modern Child-Rearing Literature

Without ready access to the support of extended family members, new mothers often seek the advice of health care professionals or books when concerns arise over child care. However, popular and professional knowledge does not seem to have made parenting easier. The knowledge explosion has created confusion and has left "experts" to disagree among themselves and make frequent changes in their emphasis. Often child-care advice leaves parents with the dangerous notion that if they administer the proper prescriptions, the child will develop as planned (Radl, 1979). Rapoport and others (1977) summarized the dominant conceptions existing in modern child-rearing literature as having the following themes:

1. Children are society's most valuable resource. Therefore children's needs are paramount and always take precedence over adults'.

2. The first few years of a child's life are critical for all subsequent experience and parents are responsible for the healthy development of their child.

3. Parenting means "mothering". Good mothering leads to healthy personality development and requires the constant presence of mother.

4. The mother-child bond is biologically determined.

5. Mothers' and infants' needs are complementary.

6. Foundations for parental experience are in one's own childhood experience.

7. The father is only indirectly important. He is the protector and provider.

8. Good parenting comes naturally. One learns on the job.

9. Parenting involves sacrifice, but rewards balance sacrifice.

10. No compromises are possible. Children's requirements are total and their neglect brings irreversible damage.

These beliefs tend to become culturally patterned expectations for parents. Such expectations are often endorsed by professionals and may develop more fully into cultural myths which, in turn, become the standards which influence parental attitudes and beliefs. Thus, many parents feel pressure to strive for ideals which are frequently unrealistic. Professionals tend to replace rather than to supplement family services and may take control of families rather than foster their self-sufficiency (Howell, 1975). Parents must come to realize that they understand their children better than anyone and that they are in a position to know what is best for their children. Professionals should be viewed as knowledgeable resources to assist parents in need.

If parents are truly viewed as the most important educators of their children, further research is needed to dispel the myths and negativism accorded to parenthood and to determine how best to support parents in this most important task.

Parent Education

This section will focus on the value and types of parent education, the importance of social support systems, and the major limitations of "packaged" parent education programs.

Benefits of Parent Education

Auerbach (1968) and Hereford (1963) suggest that the primary approach to the healthy development of children and the prevention of deviant development is to assist the parents. Appropriate educational experiences can help parents better understand their children and themselves in relation to their children. Educational experiences based on sound child development information provide an opportunity for parents to examine their present beliefs and behavior related to child rearing and can offer parents alternative ways of dealing with their children and with their social environment. Such experiences can help parents feel important and necessary to their child's development and thus can help to provide a sound basis for healthy parent-child interaction.

Types of Parent Education Programs

Unfortunately, a generally accepted body of knowledge for parent education does not exist, nor is there agreement upon the most appropriate method of delivery of such programs. Croake and Glover (1977) maintain there are three basic types of parent education: (1) Mass Media, (2) Individual Counselling, and (3) Group Discussion Methods.

Mass media includes radio, television, pamphlets, lectures to large audiences, or any effect directed to an an anonymous audience. The term parent education is becoming less frequently applied to mass media methods although mass media materials continue to be a valuable supplement to other methods.

Individual counselling is more identified with family therapy and is seldom associated with parent education. The expense of providing individual services for parent education on a large scale is prohibitive.

Group discussion methods are distinguished by the active participation of the participants regardless of the context. The leaders range from lay leaders to professionals. This method will probably be the most popular method of the future and such programs are commonly referred to as "parent groups", "parent study groups", and "mother study groups". As group discussion methods are considered to be the accepted method of future parent education programs, a more indepth review of this method will be presented.

Group Discussion: A Valuable Resource

Group discussion methods are generally designed to provide parents with guided leadership, maximum participation, and personal involvement that is based on the interests and needs common to the individual group of parents. Parents learn from one another by evaluating, selecting, rejecting, building on the contributions of others, and extending their ideas (Auerbach, 1968; Hereford, 1963). An additional benefit of such experiences may be in reduced feelings of isolation - the feeling that each is alone in their coping with personal problems. Thus, parent education discussion groups can serve to initiate and develop informal kinds of support networks for parents. Following such programs, parents may have developed new friends or may personally extend this kind of support to family members and friends who were not involved in the program.

The Importance of Social Support Systems

It is becoming increasingly evident that supportive interactions serve to protect an individual from physiological and emotional illnesses commonly associated with life stress (Burke & Weir, 1981; Caplan & Killilea, 1976; Powell, 1980). Social support networks may provide emotional encouragement and guidance to enable the stressed individual to more actively work towards solutions to problems. Such networks may also provide the person with information, skills, goods and services, or financial assistance. Recent studies (Unger & Powell, 1980) have shown that mothers who experienced high levels of stress spent more time interacting with their babies when they had frequent contact with friends and relatives than when such contacts were infrequent. Families who abused children were typically found to be under high levels of stress with few supportive social networks. In the absence of social support systems, anxiety and tension may flourish although Richardson and Kagan (1979) caution that social interactions during a stressful life period may also serve as a source of stress in some situations.

In a review of current literature, Hough and Stephens (1981) state that parents across a range of age, income, and ethnic groups rely heavily on informal supportive networks for information about child development and child rearing. Members of the extended family, friends, or written sources are the most typical sources of help sought by parents.

> Social networks may enhance a family's child-rearing processes by providing material, psychological, and emotional support; and by sharing information and reinforcing accepted beliefs and behaviors that socialize adults into the parenting role. (Hough & Stephens, 1981, p. 51)

Informal, personal networks of parents are an important and inexpensive resource available to families. In order to provide effective services for parents today, support systems must be developed that will strengthen and supplement the existing informal support networks available to families. In addition, future research is needed to determine the best means to incorporate the knowledge of how parents prefer to obtain child rearing information into effective support services that encourage parents to reach out and trust one another in mutually satisfying and supportive ways.

"Packaged" Parent Education Programs

Several "packaged" programs for parents, such as Parent Effectiveness Training, T.A. for Tots, and behavior modification techniques, are currently in vogue. Davies (1978) believes that a major limitation of packaged programs is that each appears to be insulated by its own charisma and each fails to take advantage of the strengths offered by other programs. An eclectic approach incorporating the most effective strategies of each of the programs along with a concern for preserving a continuity with the home environment is needed. An eclectic approach should provide parents with a range of resources and a variety of options for dealing with every-day events. This also implies that the weaker elements of such programs could be minimized and thus could eliminate the possible negative side effects of "packaged" programs. Some common weaknesses of "packaged" programs are outlined below (Croake & Glover, 1977; Davies, 1978; Doherty & Ryder, 1980).

1. They tend to restrict the emphasis of their teachings to a two-way relationship between parent and child. There is a need for more emphasis on the family as an interactive unit and on the specific role each family member has to offer. In addition, there needs to be a focus on the influence of the larger social institutions.

2. Parents tend to rely on professionals as leaders of the programs which may lead to a dangerous belief that one needs to be a professional to have "good" parenting skills. These programs are often based on the presupposition that parents are raising children incorrectly. These underlying assumptions weaken the effects of such programs.

3. Most of the programs are reaching parents from predominantly middle to upper socio-economic levels and mothers rather than fathers form the largest

percentage of the participants. There is a need to encourage more fathers and parents from lower socio-economic levels to participate in programs designed to meet their needs.

4. To date, evaluation of "packaged" programs has been largely absent and ineffective. Most research consists of descriptions of various programs with no attempt to measure the results. Positive comments received by the participants are most often cited as evidence of an effective program. Better research designs and instruments are required to provide such evaluations with reliability and validity.

It is the belief of the present author that it is time to pay tribute to the family as the most important institution in society today and it is time to recognize that we can discover new and creative ways to make family living a more rewarding experience. The first three years of a child's life may well be a critical time for parent education. It is certainly a time to establish a healthy relationship between parent and child that will endure for a lifetime.

CHAPTER III

METHODOLOGY

This chapter will include an overview of the research design and a description of the methods and procedures used in data collection. Also presented are the sampling techniques and analysis of the data.

Research Design

The purpose of the study was to discover the nature of a Mother's Support Group Program. The program examined was more commonly referred to as "The Mom's Group" and was comprised of four individual programs operating in various community locations in Edmonton, Alberta. The study was intended to be exploratory in nature.

The study utilized both quantitative and qualitative data collection procedures. The qualitative procedures were employed to (1) identify and describe the meaning participants gave to the program, and (2) complement the factual kinds of information received through the quantitative data.

Quantitative data were collected by means of two questionnaires:

1. Program leaders were asked to complete a program evaluation questionnaire.
2. Program participants were asked to complete a two part questionnaire including program evaluation and demographic data.

The questionnaires were completed during the final session of each of the four community programs.

Qualitative data were gathered by way of the author's presence in the program as a participant observer. Each community program was attended by the author a total of four times:

1. The initial session of each program was attended to acquaint program participants with the research study and to develop a base-line of data for participant observation procedures.

2. Two other program sessions were attended for the purpose of data collection.

3. The final session of each program was attended to administer and collect the questionnaires.

The author kept a daily diary as a participant observer.

Questionnaires

The questionnaires designed for the program leaders and program participants were prepared prior to the commencement of the Mother's Support Group Program. They were reviewed and critiqued by Mother's Support Group Program Administrators. Staff members from the Early Childhood Education and Educational Administration at the University of Alberta with expertise in questionnaire design also provided valuable feedback. In addition, the questionnaires were pretested to evaluate their effectiveness in terms of format, content, and readability.

Pilot Study

The survey questionnaires were pretested on December 10, 1981 in a Mother's Support Group Program in Red Deer, Alberta. Six program participants and two group leaders completed the questionnaires during the final session of their Fall program. This program was also sponsored by the Parent Resource Unit, formerly of Alberta Social Services and Community Health. At this time, it was the only other program operating in the province which was comparable to the Edmonton program in terms of goals, objectives, content, and format. As a result of the pilot study, several revisions were made in the survey questionnaires.

The participant observation procedures were developed prior to the commencement of the Mom's Group Program and were pretested during the initial program session of each of the four community based programs. The initial visit to each program provided the researcher with an opportunity to become acquainted with the program leaders and participants and with the operation of the individual programs. Participants were informed of the purposes of the study and their permission to conduct the study was received. A base-line of data was collected and, as a result of information gathered, several revisions were made in the observation procedures.

Participant Observation

Throughout the study the researcher acted as a participant observer on four separate occasions in each of the four Mother's Support Group Programs. The primary objective of the researcher as participant observer was to discover the nature of the Mother's Support Group Program. The researcher took part in the programs as a group member and, as such, was immersed in the activities of each program. According to Spradely (1980), a participant observer comes to a social situation with two purposes: (1) to engage in activities appropriate to the situation and (2) to observe the activities, people, and physical aspects of the situations.

While immersed in the program activities, the researcher attempted to see the world from the point of view of each mother in the program without affecting her view (Bogdan, 1972; Bollens & Marshall, 1973). A diary was kept by the researcher to record observations and personal interpretations on a daily basis for use as descriptive data. No specific hypothesis or preconceived notions about what to observe were formed prior to the observation and recording sessions.

> In many situations we have no idea what is important. Therefore to have a specific research design or a specific hypothesis to test imposes a preconceived reality on the situation.
> (Bogdan, 1972, p.19)

Program participants were fully informed about the role of the researcher and the objectives of the study during the first session of each program. Qualitative and quantitative procedures were used in combination to complement the strengths offered by each and thus to gain a more complete understanding of a complex social situation.

The Sample

The Mother's Support Group Program in Edmonton, Alberta was comprised of four programs operating in the following community locations: Castledowns/Kensington, Clareview, Duggan, and Westmount. Forty-two program participants and four group leaders participated in the program. The two hour sessions were held once a week for 12 weeks from early October, 1981 to mid-January, 1982. Participation in the program was voluntary. The program was sponsored by the Parent Resource Unit, formerly of Alberta Social Services and Community Health, and the Family Life Education Council of Edmonton.

Data Collection

The data were collected from October, 1981 to April, 1982. The procedures used are described in the section following.

Quantitative Data

The procedure for this study involved self-report questionnaires completed by the program leaders (Appendix B) and program participants (Appendix A) during the final session of each of the four programs. Program participants were encouraged to complete the questionnaires and submit them to the author prior to their departure from the session. For participants unable to attend this session, a letter of explanation (Appendix C), a questionnaire, and stamped return envelope were mailed to them. The return envelopes were addressed to the author and participants were encouraged to complete the questionnaires and return them as soon as possible. A reminder letter (Appendix D) was sent two weeks later. A second copy of the instrument was mailed out to all non-responding households two weeks after the reminder. Accompanying the instrument was a second cover letter (Appendix E) stressing the importance of response.

Names and addresses of the program participants were obtained from the program leaders. The respondents were assured of confidentiality and anonymity to protect their privacy.

Qualitative Data

Qualitative data were collected using participant observation techniques. A program visitation schedule for the study was developed prior to the commencement of the programs. During each of the initial program sessions, the researcher introduced herself, outlined the objectives of the research, and asked permission of the program participants to conduct the research. The initial sessions were also used for the purpose of collecting a base-line of data. The baseline data collection assisted the researcher in becoming familiar with the programs, program participants, and in testing and refining the participant observation techniques to be used during the course of study.

Following the baseline data collection, a time-out method of recording was employed. The researcher observed for 30 minute time periods and then left the sessions to record notes for 10 minute intervals. The time-out method was selected because of the sensitive nature of some of the discussion topics and the massive amount of information generated during each program session.

Many program discussions involved sharing personal kinds of information, often of an intimate nature; thus, the researcher did not take notes or use a tape recorder during the program sessions.

> Taking notes in the presence of subjects or carrying any type of recording device can be detrimental to establishing rapport and trust, by serving as a reminder to the subjects that the researcher is collecting data.
>
> (Bodgan, 1972, p.42)

The researcher's goal was to establish rapport and gain the trust of the program participants by "blending into the situation" without disturbing the setting or having her participation interfere with her function as an observer (Bogdan, 1972).

> While some people might be upset with your presence in the situation, it is also the case that most people will soon forget that you are there and very shortly begin to act 'naturally'.
>
> (Runcie, 1976, p. 87)

Group leaders, program participants, and children frequently entered and left the room throughout the program sessions. Therefore, when the author left the program to record notes in private, it did not appear to have a significant effect on the program participants. As discovered during the baseline data collection, it was not possible to remember all that takes place during a two hour program session. Selective bias and distortion through memory is excessive. Thus, the researcher chose to record key phases of remembered events following 30 minute time intervals and, whenever possible, wrote detailed notes immediately following each session.

For the most part, the 30 minute observational intervals were adhered to carefully. However, due to the nature of the program, the researcher was required to be flexible as it was not always appropriate to leave a session after exactly 30 minutes. Rather than risk disrupting group activities, the researcher occasionally chose to shorten or lengthen the observational interval.

It was recognized that the researcher affects and was affected by the group. However, by attempting to limit personal involvement in the group and acting as natural as possible in the setting, it was anticipated the effects were minimized.

Data Analysis

The quantitative data obtained were key punched into I.B.M. cards and stored on disc in the Amdalhl 470 V-8 computer at the University of Alberta. The data were analyzed using the SPSS Crosstabs Program.

Chapter IV

MOTHER'S SUPPORT GROUP PROGRAM: PHILOSOPHY, PROGRAM, SETTINGS, AND PARTICIPANTS.

Introduction

This chapter will present a description of the program philosophy, goals and objectives, and physical settings of the Mom's Group. It is included in order to to provide the reader with a clearer understanding of the program. In addition, it provides the succession of research activities that took place and a basic context for understanding the findings of this study. The background of the program leaders and participants will also be included. The information that follows was drawn from the participant observation notes, questionnaire data, and records received from the program coordinator.

Program Philosophy

The basic philosophy of the Mom's Group Program is based on the belief that the period following the birth of a baby is critical. The new parent must not only provide care for a totally dependent human being, but must reorganize personal schedules and adjust to the new demands and roles that parenthood brings. During this period of adjustment new parents, particularly mothers, often become isolated and removed from familiar sources of support. This is especially true when people are separated from their extended families or are newcomers in an area.

The purpose of the Mom's Group was to create a network of mutual support for new parents. Parents were provided with an opportunity to meet one another, discuss common concerns, and become involved with educational speakers. The ultimate goal of the program was to enhance the experience of parenthood. Educating parents and providing an informal setting in which to share concerns was said to lead towards more awareness and hopefully a more relaxed, enjoyable, and understanding time with babies. More specific goals for the program referred to by program leaders were:

1. to provide practical, relevant information and ideas about parenting

2. to help the mothers learn to be good parents (parenting regarded as a developmental skill)

3. to encourage the mothers to set goals, then develop and implement plans to achieve their goals

4. to encourage personal motivation

5. to encourage social networking and the continuation of networking following program termination

6. to establish a babysitting co-operative amongst group members

Program Outline

The program offered parents and their children an opportunity to meet for two hours a week for twelve weeks. Babysitting was available on the premises at no cost to the participants. The meetings were designed to encourage informal discussions and sharing of concerns and experiences. Educational speakers formed an important part of the support system as it is believed that broadening areas of knowledge helps parents to prepare for the future and leads towards a more positive and active attitude.

The format of the meetings included:

1. speakers concerned with different aspects of caring for a young child

2. group discussion: (a) with speakers
   (b) within group

3. discussion of group needs and planning for future sessions

4. program evaluation

A sample program agenda follows:

The Program

Week One Introductory Session:

- Focus on getting to know one another. Sharing of birth experiences, adjustment to parenthood, and concerns.
- Exploration of individual expectations of the program.
- Provision of background information of the program.
- Discussion of babysitting arrangements, speakers, and special topics.

Week Two	Guest Speaker: Public Health Nurse - Information regarding vaccinations, fevers, rashes, diarrhea, breastfeeding, introducing solids, and the Denver Development test. - Discussion concerning adjustment to parenthood and setting personal goals. - Information regarding available resources from the Public Health Unit.
Week Three	Open Session: - Discussion concerning looking after mom; the importance of taking time for yourself; recognizing and caring for your own needs; goal setting; and finding baby sitters. - Discussion concerning the marriage relationship; ideas for positive communication; including Dad in the parenting role; finding time for Mom and Dad.
Week Four	Guest Speaker: Pediatrician - Information provided on childhood diseases, nutrition, rashes, diarrhea, fever, ear aches, colds, flu, language

development, and behavioral concerns.
- Discussion on medication.
- Group questions and discussions.

Week Five Open Session:
- Informal discussion concerning feeding, toilet training, discipline, children's fears, T.V. advertising, and advice from relatives and friends.

Week Six Guest Speaker: Budgeting
- Presentation on practical budgeting and finances; consumer information; creative home and money management.

Week Seven Open Session:
- Continued discussion on goal setting; paying attention to self and own needs.
- Discussion of goals set at a previous meeting: Outcomes and/or what stopped the follow through?
- Discussion of sleeping and feeding problems; saying no; spanking vs. distraction; coping with advice from relatives and friends.

Week Eight	Guest Speaker: Child, Home, and Toy Safety - Information and handouts provided on child and home safety; choosing safe and developmentally appropriate toys for children; tips on being a consumer.
Week Nine	Guest Speaker: Parenting instructor - Focus on parenting as a learned skill; exploring parenting styles; determining parent/child needs; developing positive interaction between parent and child.
Week Ten	Open Session: - Discussion about Christmas plans: keeping a hectic holiday safe and happy for parents and baby; ideas for making travelling with a baby easier.
Week Eleven	Guest Speaker: Nurse - Presentation on physical and emotional fitness: post natal exercises; time management; importance of maintaining time for Mom.
Week Twelve	Evaluation: - Discussion concerning "where do we go

from here?"
- Focus on resources available for Moms and children to continue their involvement in programs; maintaining support networks.

Program Settings

A Church

A church located in north-west Edmonton on a corner lot adjacent to a main traffic thoroughfare was the setting of one of the community programs. The areas immediately north and south of the church were large residential districts.

The church was a one story, rectangular building with green wooden siding and brown trim. A simple, wooden, A-frame steeple rose above the roof line. Several white beams curved upwards off the edges of the roof and extended down the side to the ground lending an oriental flavor to the building.

Program meetings and child care were held in the church basement. Mothers and young children entered the building by the rear entrance and descended down a cement staircase to a long, dimly lit corridor with rooms off to each side. The mothers met in a long, narrow church study meeting room with rectangular tables and wooden backed stacking chairs. The children were located at the end of the hallway in a small room appropriately furnished and equipped as a nursery.

A Home

The second community program was located in a newer residential district in the extreme north-east corner of Edmonton. The meetings were held in a wood sided bi-level home belonging to the group leader. The mothers and babies assembled in the comfortably furnished front room. Coffee, tea, and goodies were invariably laid out on the table in the adjoining dining room.

A mother with a two year old attended the program weekly to babysit the children. A child's bedroom was designated as the child-care area, however, only a few older children (2-3 years) ever remained with the babysitter for any extended length of time. The smaller babies stayed with their mothers in the front room while the older children moved freely about the main floor rooms of the home. Toys and assorted baby gear carpeted the floor area of the front room amidst some of the mothers and children who preferred to station themselves on the floor.

An Office Building

The third community program was housed in an office building situated in a downtown commercial area of Edmonton. It was a fairly modern styled, newer office building with dark grey mottled cement exterior punctuated with smoke colored rectangular glass windows. Several lush spruce trees adorned a small plot of grass located in the immediate front of the building.

The mothers met in a spacious, carpeted, wood panelled conference room. Three brown and beige plaid couches faced one another in the center of the room providing a comfortable conversation area. Upholstered stacking chairs completed the seating requirements while in one corner of the room a small table was typically laid out with coffee and tea. The children were cared for in a large, sparsely furnished room located at the end of the hall away from the mother's meeting room. The leader usually brought a variety of toys for the children to play with and the child-care room soon became filled with baby gear and busy children.

An Elementary School

An elementary school located in a newer residential district in south-west Edmonton was the location of the fourth community program. The flat roofed, spreading structure was built with an assortment of red, brown, and white bricks. Young evergreens and deciduous trees were placed interspersedly across the spacious and neatly kept front lawn. Low growing evergreens and shrubs extended across the front of the building. To the immediate left of the school was a creative playground with a selection of climbing apparatus made of heavy logs.

Upon entering the building, the soothing sounds of soft classical music filled the hallways. A friendly smile or greeting was usually available from office personnel. The mothers met in a kindergarten classroom that was occupied by children only part of the day. The room was sectioned off into various learning activity centres for the children and brightly colored charts and activity displays adorned the classroom walls. A fully equipped kitchen was attached to the classroom with an adjoining door. Adjacent to the kitchen was a fairly open classroom space with a low circular table surrounded by adult sized chairs for the meeting. The children were cared for in a portable building located on the west side of the main building. While the portable building contained large sized tables and chairs, it was essentially a bare room. The group leader brought an assortment of toys for the children.

Program Leaders and Participants

Leaders

The program leaders each had one child and had become interested in the Mom's Group following the birth of their baby. All but one of the leaders had led a Mom's Group previously. One leader held a graduate level degree from a university while another had some graduate training. A third leader held a university degree and the fourth leader was a part-time university student. Two of the leaders held part-time jobs. It appeared that only one of the leaders had specialized training or experience in group process and dynamics.

Participants

The program participants ranged in age from 22 to 42 years with a mean age of 29. The majority of participants were full-time homemakers and first-time mothers. The educational achievements of the participants ranged from having completed "some high school" to "some graduate work". The educational mean was equivalent to a college diploma. Eighty-three per cent of the participants owned their own home and the majority had lived in their present community for 1 to 5 years. Their total yearly incomes before taxation ranged from $15,000.00 to more than $40,000.00 with a mean total in excess of $30,000.00.

Summary

The Mom's Group Program was established to provide mothers with a network of mutual support to assist them in their adjustment to parenthood. Weekly two hour meetings were held for twelve weeks which provided mothers with the opportunity to meet other mothers and exchange experiences and concerns about parenting. Educational speakers were periodically engaged to inform parents about various child rearing topics and to allow for exchange of ideas. The ultimate goal of the program was to enhance the experience of parenthood and thus to provide children with a healthy environment in which to develop.

The Mom's Group Program consisted of four individual programs that operated in a church, a home, an office building, and an elementary school in various community locations in Edmonton. The program leaders had become interested in leading the programs following the birth of their own babies. Background experience and training in leadership was not required to become a program leader. The majority of the program participants were first-time mothers and full-time homemakers from middle class backgrounds.

The chapter that follows will provide a description of a day in the Mom's Group as taken from the author's participant observation notes. It is included to provide the reader with a comprehensive account of what a day with the moms was like.

Chapter V

A DAY WITH MOMS

Introduction

This chapter provides an ethnographic account of one of the sessions of the Mother's Support Group. The day chosen for description occurred on the fifth session of the course.

The purpose of the following account of a Mother's Support Group session was to describe the events that occurred. The descriptions were taken from the author's notes which were developed following participant observation sessions. The observation notes formed a substantial part of the data collected during the course of this study and were gathered prior to receiving the information from the questionnaires. It is recognized that it was not possible for the author to attain an ideal state as participant observer due to membership in the group. The author affected the group and was affected by the group. Please note, the names of the group members in this chapter have been changed.

A Day with Moms

The simple A-framed steeple of the wooden sided church rose to greet the overcast sky above. The sun attempted to shine through a broken section of greyish clouds. The trees were barren of leaves, the grass was dry and brownish in color, but the air was very warm for November.

A large navy blue sedan pulled into the gravelled parking lot adjacent to the church. A woman got out of the sedan and took a small baby in a car seat out of the vehicle. She carried the car seat with the baby to the back of the church and disappeared into the building. A station wagon containing two women and several children parked next to the navy sedan. One of the women carried a child dressed in a pink furry snowsuit into the building while the other woman carried a child dressed in a blue winter jacket with a white fur trimmed hood. A third small child, dressed in a camel colored overcoat and matching cap, followed the group into the building.

The Mom's Group meeting was being held in the basement of the church. From the top of the cement staircase children's voices could be heard. The descent down the staircase was dark as the walls were made of cement and there were no windows to light the way. At the base of the staircase there was a long dimly lit corridor with rooms off to each side.

An assortment of child and adult sized winter coats hung on hooks in the hallway offside of the child-care room. The sounds of busy mothers settling their infants came from within the room. The meeting room of the Mom's stood empty.

Donna hurried out of the children's playroom and sped quickly down the hall. Her head was bent down towards the floor as she moved and she seemed somewhat startled upon hearing a morning greeting. "Oh!...No, it's not a good morning," she replied. "There are no babysitters this morning."

Donna explained that the original babysitters for the program had quit. She had found two other sitters and agreed to pick them up and bring them to the session. She drove her husband to the airport, took her daughter to the day-care center, and then went all the way to the west end of the city to pick up one of the babysitters. Moving into the child-care room, Donna continued telling her story to several mothers and babies already assembled. When she arrived at the babysitter's home, Donna had waited at least ten minutes while the woman, who was getting children ready, mentioned that one of the children had the measles and she didn't know if she should come or not. Donna affirmed that it was probably not a good idea for her to bring them as the other children might catch the measles.

Donna then proceeded to pick up the other sitter who lived near the church. No one came to the door when she rang. She went home to check the address and then returned to the same house. Still there was no answer.

"Could we have the meeting in here?" Donna asked quietly of the group assembled. There was no response in answer to the question.

The child-care room was approximately 9' x 12' in size. The floor was carpeted. Raggedy Anne and Andy wallpaper covered one wall and a matching striped wallpaper covered the remaining walls. There was a mesh playpen in one corner of the room and a white wooden crib adjacent to it. On the opposite wall was a wooden playpen, a small child sized table, and three boxes of toys in front of a bookshelf containing toys. A second small table lined the adjoining wall.

Five mothers, four small children and three babies were assembled in the room. Diane sat on the floor adjacent to her baby girl who sat in an infant car seat. Bonnie and Lois sat on small child sized chairs holding their infants. Three of the older children were gathered about the small table playing with toys.

Michael (three years old) walked over towards his mother, Janet. He had a package of whole wheat biscuits. His baby brother, Jeffrey, toddled after him. Jeffrey had a pillow in one hand and a small glass bottle of milk in the other. Michael was reluctant to give him a biscuit and repeatedly turned his back on Jeffrey as Jeff relentlessly pursued him.

"Don't be so greedy. You can share," scolded Janet. Michael gave Jeffrey a cracker. Jeffrey began to toddle off happily with his cracker but had great difficulty discovering a way to hold the pillow, the bottle, and the cracker all at the same time. Eventually he fell backwards and sat down smartly on the floor. As he landed on the floor his knees rolled towards his chest and he toppled over backwards until he balanced on his neck and shoulders. Finally, he reorganized his body parts and possessions and then was off once again. The cracker, less one small bite out of one corner, remained on the floor. However, he retained careful possession of the pillow and bottle.

Diane sat on the floor next to an infant car seat containing her baby daughter Melissa. "When do babies usually crawl?" she asked of no one in particular.

Donna answered that babies usually crawl between seven and nine months. Another group member added that usually babies pull themselves about on their tummies first. "She doesn't like it on her tummy!" Diane remarked in an alarmed tone. "Neither does he," Bonnie stated in a matter of fact way.

Colleen wandered about the room offering the children graham crackers from a bag. Jeffrey noticed one of the smaller babies with a graham cracker and tried to take it from him. Janet quickly intervened. Colleen offered Jeffrey a cracker of his own but Jeffrey was not looking her way. Janet placed her hands on Jeffrey's head and helped him turn his head until he could see Colleen offering him the cracker.

"Come and get it," encouraged Colleen. Jeffrey hastened over to Colleen to accept the cracker. Colleen then passed Stacey a cracker. Stacey already had one in the hand Colleen could not see. As Stacey accepted the second cracker, Carol began to object but then paused in silence following a muffled, almost inaudible "No." Stacey noticed that the small boy beside her did not have a cracker and she passed him one of hers.

"Is anyone else coming?" inquired Lois of Donna. Several of the mothers expressed concern about the class being held a day later than usual due to the Remembrance Day holiday. They were concerned that some of the mothers didn't know the class had been changed and wondered if all class members had been telephoned about the change. Donna assured the group that everyone had been telephoned and said that quite a few moms had phoned her to say they wouldn't be able to come to this session.

Valerie entered the room carrying a baby in a car seat. She put the baby down in front of Donna and then immediately left the room. Donna began to take the baby out of a blue colored snowsuit. Julie, the mother of twins, entered shortly after Valerie left also carrying a baby in a car seat. She sat the car seat down on the floor. Valerie soon returned a second time carrying the second twin in a car seat, and placed her next to the other twin. The twins were dressed in matching green knit bunting bags. One of the twins slept peacefully while the second cried out loudly to be fed. As the newest arrivals were getting settled, Donna again explained the babysitting dilemma.

Michael smiled at me and then hid behind the door. A smile in return was the beginning of a game of "hide and seek" which continued for several turns.

A circular tray of snacks including celery sticks, apple quarters, cheese slices, and whole wheat biscuits was placed in the center of the room on a small stool. The members of the group were intently involved in a discussion on toilet training. Donna reported that her daughter, Amy, trained very early on her own but is now wetting herself during the day. She has always wet at night but if she drinks too much before bedtime, she soaks the bed and Donna must change the sheets in the morning.

Janet explained that her first child had also trained very easily - so easily that she didn't know how to train the second child. Both children trained quickly but now Michael (the third child) is wetting at night. Janet and her husband have tried spanking Michael, ignoring him, and "nothing seems to work". Janet's husband said he can't stand it anymore. He hates getting up and changing Michael. Now they put him in diapers at night. Michael doesn't like that and says, "I'm not baby." Last night Michael was dry so Janet decided that, "If he doesn't wet the bed, he won't have to wear diapers".

Donna reported the advice she was given was "not to give them anything to drink after 6 o'clock" at night.

"You tell that to your child," Janet complained. Donna and several other mothers agreed that this is very difficult to do.

"He doesn't understand why he can't have any. I tell him it's because he'll wet the bed but it doesn't mean anything to him," confirmed Janet.

Donna concluded by saying that her advice source believe she should be very firm about wetting with Amy.

"Can you tell the difference in her cries," asked Donna of Diane. Diane replied that her baby had different cries but she isn't always able to tell what they mean. When Melissa whimpers repeatedly, she usually wants something, such as to be held or cuddled. "Sometimes she just screams. I know there is something wrong." Diane went on to explain that she has a difficult time knowing what to do when the baby whimpers and acts like she wants to be held. She is afraid she might spoil her.

"You can't spoil a baby by picking them up," stated Valerie.

"That's right," confirmed Donna. "Research shows that if you pick a baby up when it cries then later when the baby is older, it will not cry as often." Several other mothers murmured in agreement. A chorus of replies affirmed that babies are too young to understand. Babies need to be picked up to feel secure and to learn trust.

"I can tell the difference in their cries," Julie stated as she looked momentarily at the twins Tamara and Kimberly.

Donna mentioned she found Burton White's book very helpful when Amy was little. His book had ideas for all kinds of activities you can do with your baby. She justified picking Amy up by referring to Burton White. "Burton White says I should pick her up." So she did pick Amy up but later on Amy needed to become more independent of her. Amy was used to being picked up when she wanted to and she expected it. Now Donna finds Dreikurs book entitled Children the Challenge very helpful.

"It was difficult at first. Amy was hanging around my legs screaming." Donna began to explain to Amy, "I'm busy now but I'll hold you later." Then after a time, Donna began to give Amy choices. "I'm going to be writing at the table. Do you want to write at the table with me or do you want to play?" Donna was pleasantly surprised when Amy wanted to play.

Donna had been holding Valerie's baby Meigan. As she left the room she passed the baby to me to hold.

Meigan was about four months old and was dressed in red corduroy overalls and a t-shirt. She came complete with a blue pretzel-like teething ring. Meigan sat happily on my lap, babbling, smiling, bouncing, and observing the happenings in the room. Her teething ring fell to the floor twice and each time I quickly retrieved it. Later, Meigan dropped the teething ring and it rolled under a chair too far away for me to reach. Eventually, Meigan spit up down the front of her outfit and all over my arm. Julie passed me a small cloth, then a second cloth which was larger with which to clean up the spewed milk. Meigan grasped at each cloth in turn and pulled them to her mouth. I returned the cloths quickly thinking they were not clean objects for play.

By this time, Stacey was getting tired. Carol explained to Diane that when Stacey begins to get tired she misbehaves and "its time to put her down". Carol walked over the the mesh playpen and attempted to put Stacey down to sleep. She covered Stacey with a soft pink blanket, then seemed to realize Stacey would not stay. Carol picked her up and returned to her seat. She wrapped the blanket around Stacey and cuddled her in her lap. Stacey lay in her arms comfortably, with her thumb in her mouth and her eyes opened wide.

Donna returned to the meeting and audibly wondered what to do with tea and coffee. It was suggested she put them on the long low table as it was somewhat protected from the children's reach by the mothers sitting in front of it. Lois moved her coat off the table in preparation for the refreshments. I asked permission to hang up Lois's coat and then went to hang it up outside the play room on one of the available hooks.

Michael and Jeffrey stood between Janet's knees. Janet sat forward on her chair with her arms about the boys. Michael began to squeeze Jeffrey and Jeffrey cried out in protest. "He doesn't want your hugs now," stated Janet and the skirmish ceased.

Adam and Susan remained by Colleen for most of the session. They were interested in the boxes of toys and played with the toys at the small table or near by the table for most of the session. Colleen indicated that Susan belonged to her neighbor. The neighbor had "a crisis" and Colleen agreed to care for Susan to help her out.

Lois fed Kara a bottle, then sat Kara in front of her. Later Lois stood while she held the baby and rocked her.

Diane noticed Valerie was changing Meigan's diapers and was using Pampers. "I used the newborn size at first and now with the second size she breaks out in a rash. I guess she is allergic to them," commented Diane.

"I don't use them all the time. They are handy when you're going out," replied Valerie. Several mothers agreed the Sears diapers are not the best. "They tear when you're fastening them," reported Carol.

Janet told about sending her husband to the store for three diapers and a couple pair of socks. "He spent $25.00!" She said she was both surprised and shocked when he told her he spent that much money, but she became very excited when she realized he bought a box of disposable diapers. "I was doing eight loads of laundry at the time."

"Your baby looks just like you," Diane emphatically stated to Bonnie.

"I had people tell me if Amy had a beard and glasses she would look just like her Dad," added Donna.

"They say that if a girl looks like her Dad, then she's going to be good looking when she grows up," relayed Janet.

"What's that they say?" asked Donna. Upon Donna's request, Janet willingly repeated the saying.

Valerie sat on the floor in the center of the room with one of the twins and Meigan lying on a blanket in front of her. Meigan rolled on to her side to get a better view of the other baby. The babies eyed each other intently, smiled, and cooed to each other.

Suddenly, a shrill, piercing alarm sounded to momentarily silence the activities in the play room. As the significance of the fire alarm became recognized throughout the room, a state of confusion and panic was evident. Donna quickly tempered the panic by advising everyone to bundle up the babies and head towards the exit.

Julie bundled the twin she was holding as she looked worriedly at the twin on the floor. I scooped the twin off the floor and then searched frantically for a blanket. Julie provided a very thin pink blanket for

Kimberly. I wrapped it carefully about the baby worrying that it was not warm enough for being outside. However, there was no time to dress Kimberly in her bunting bag.

As we stepped outside the room, Janet came down the hallway towards us with Michael and Jeffrey in tow. "Don't worry. There's no fire. It's just the kids," she stated calmly.

A man hurried towards us from the opposite end of the hallway. Without breaking his stride he reported, "I don't think there's a fire but we'll check carefully to make sure," and then he disappeared from view up the front staircase.

Donna decided it still was not wise to remain in the hallway outside of the child-care room. If there was a fire, we should be closer to the exit. The shrill, monotonous tone increased in volume as we moved closer to the exit. Kimberley's eyes were wide with wonder? ... fear? I wasn't sure about what the baby was feeling but I was very conscious of trying to remain calm. I didn't want to transmit my fear to the baby. The alarm was so loud at the base of the staircase that I was afraid it would hurt the baby's ears. I stepped back into the hallway. Kimberly's body was rigid and her eyes remained widely open. I moved into a small opening to stand with Julie and Tamara, Valerie and Meigan.

Julie commented on how stiffly alert Kimberly was. "There's your mom," I said to reassure the baby.

"She doesn't know who mom is yet - anyone will do," Julie reassured me.

Two men came down the staircase. They confirmed there was no fire in the church. They indicated they would phone the fire hall and explain what had happened and they would also ask them to shut off the alarm. We returned to the playroom and settled back down in our places.

Michael and Jeffrey stood huddled in their Mother's arms. Michael's whole body noticeably shivered and shook. Janet explained that it was Jeffrey who pulled the alarm.

"I have a question I wanted to ask quite a while ago," Lois announced loudly to attract the attention of the group. "Is anyone's kid afraid of vacuums?"

"Mine is," Donna and Carol chimed in unison.

"Is this something they'll get over?" Lois queried.

"Now Amy rides it." Donna went on to explain that she would vacuum when Amy was asleep and then after a while Amy's fear of the vacuum wasn't a problem anymore. "I don't know what causes kid's fears." Donna then told about her trip to the coast to visit relatives. Her niece was afraid of monsters and now, so is Amy. "I don't know what she thinks a monster is."

Carol and Valerie agreed that many children's tales are very violent. Carol provided the example of Hansel and Gretel. They lived with their wicked stepmother and father. The father takes them into the woods and leaves them there. A wicked witch puts them into a cage and tests their fingers to see if the children are fat enough to eat. Hansel and Gretel kill the witch by pushing her into a fire.

"The road runner is one of the most violent shows going," Valerie added.

"I don't think that kids are frightened by it," voiced Carol.

Donna disagreed.

"I recall going to a movie with my sister when I was very young to see Snow White and the Seven Dwarfs. I can still see that wicked witch," I testified.

The discussion moved on to advertising and children. Valerie mentioned that Consumer & Corporate Affairs have a pamphlet about how to deal with television advertising and children.

"They have laws to protect children now," proclaimed Diane.

Valerie talked about how unfair it was when commercials were able to use content such as "Tell your mom to buy you ______________ right away".

Carol confirmed that she gets caught up with commercials, too. "I would really like to have a video machine. I can't afford one."

Janet relayed her concern about one of her boys who would throw tantrums in the store or at home if she refused to buy him what he wanted. At the present time, she deals with this problem by saying, 'Maybe I'll buy it for you next week' and then by next week he forgets.

I was holding one of the twins. Kimberly was very alert. Her legs and arms bounced rapidly. "She's active," I reflected.

"Yes," said Julie, "she's beginning to really move about."

"Do you need a rest?" asked Lois of Julie, "Can I take the baby?"

Julie indicated that all was well and she did not need a break. Lois looked disappointed, so the author offered to let her hold Kimberly. Lois seemed pleased but soon after receiving Kimberly, the baby began to cry.

"She's getting hungry," Julie affirmed. Lois returned the baby to Julie to be fed.

Jeffrey found a large squeaky toy and stood on it repeatedly. It made a very loud, continuous, squeaking noise. Janet asked him to stop.

I was sitting on the floor and realized that I was sitting with my back towards Colleen. I apologized and shifted my position so that Colleen and Adam were not cut off from the group. Adam offered to show me the small bulldozer he was holding but he would not allow me to touch or hold it. Then he showed me the small car he held in his other hand.

"Can I have it?", I asked.

"He's just teasing," replied Colleen.

I picked up a toy skidoo and pushed it along the floor several times while Adam watched intently. Diane moved over to the crib and placed her baby in it. She changed Melissa and then left her there to sleep.

Kara, Lois's seven month old baby, sat on the floor behind a large diaper bag. I passed her a large plastic bowling pin. Kara eyed it carefully and then knocked it over with her hand.

"What about feeding?" Carol queried.

"I've got a couple of good books," Donna replied.

"I'll bring them in."

Carol told about how worried she felt when her daughter would chew bread a couple of times and then swallow it.

The conversation then shifted to a discussion about intelligent children being placed a grade ahead of their age level in the public school system.

"What about you, Bonnie? You're a teacher. What do you think about this?" asked one of the group members. (Bonnie's reply was audible only to a few group members.) Some group members thought such children needed the stimulation while others believed it might be emotionally harmful for children when they reached their early teens. The concluding statement of the discussion was that "it depends on the child".

Donna held Todd on her lap and gazed at him admiringly. "Is Todd always this good?" Donna asked Bonnie.

"Oh yes," replied Bonnie.

"Does he cry?" persisted Donna.

Bonnie told about her mother-in-law's recent visit. Bonnie was busy and Todd began to cry. Her mother-in-law finally asked if Todd was alright. Bonnie indicated she felt somewhat ill at ease, not knowing what her mother-in-law was thinking about her.

Donna indicated that she got all sorts of advice from many sources when Amy was little, and not all of the advice was helpful.

Valerie sat at the far end of the room on top of a small child-sized table. She breastfed Meigan. She reported that she often felt ill at ease with the way she handled her child when other people were around. She worried that other people were constantly being critical of her parenting methods. She was especially worried about going home for Christmas. She was fearful her father would think it wasn't right that she was still breastfeeding.

"There's such a difference of opinion on this." Valerie also worried that her family might think she was spoiling the baby by picking her up so often.

"I have a question," Lois interjected. Upon receiving the attention of the other group members, Lois indicated that her husband was 35 and she was 25. He wanted another baby in the next year or not at all. Lois did not want another baby so soon. She knew that someday she wanted another child so her little girl wouldn't "be alone in case something happens to us".

"You can relate to this," continued Lois (comment directed to Colleen.) "I don't know how to talk to him about this. He doesn't want to be an older father. My grandfather didn't have kids till his mid 30's. He had five children. Look at him. 'He's different,' he says."

Donna entered the room and began to pick up toys.

"What time is it?" someone asked.

"Almost 12:00," replied Donna.

Carol began to explain that her husband was 37 and she was 35. They were thinking about having another child too. Her husband was wanting another child only after having listened to a lot of other people talk about having children.

"My husband doesn't want any more kids. He's sick of the noise and mess," stated Janet.

I asked Donna if she had possible babysitters for the program next week. Donna informed me of the plans to contact the Senior Citizens group in the area. She was hopeful they would help out.

"I noticed you with the baby. It looks good on you," Donna mentioned to me.

I told Donna that my sister-in-law was now pregnant. Donna reached over and patted my stomach and said "maybe".

"Don't have a baby during the summer months," warned Diane. "I spent the whole summer in the basement. It's so hot."

"I have to go now," interrupted Donna. "I have to pick up Amy. Next week we're having a speaker." Donna shrugged her shoulders to indicate that she had forgotten who would be the guest. "I'm so organized today."

"A speaker next week. It doesn't matter who," consoled one of the participants.

None of the mothers were ready to leave the program at 11:30 and several were not ready to go at 12:00. At 12 o'clock the author followed Diane and Melissa out of the room enroute to go home. Diane was carrying her baby in an infant car seat.

"Your little girl is really cute," I commented as I caught up to her.

"Oh, thank you," replied Diane. "I don't know who she really looks like yet - my husband or me."

"I have to get my coat," I mentioned as we passed by the kitchen area. I picked up my coat and notepad and caught up with Diane at the church exit. Diane held the door open for me by leaning against it with her back. Together we walked out to the parking lot. Diane worried audibly about the bright sunshine in her baby's eyes. I mentioned what a beautiful day it had turned out to be - warm and very sunny.

"I'm not looking forward to taking her out in the winter time," stated Diane (referring to the extra clothing and time it took to get oneself and baby ready.)

Diane declined my offer of help getting into her car. She placed the car seat on the ground and we exchanged goodbyes as I headed off towards my car.

Discussion

With so many mothers and babies contained in such a small room, the Mom's Group scene was one of busy confusion. There were a multitude of happenings taking place throughout the session, including: individual conversations; group discussions; children's activities; and mothers attending to the needs of the children. Conversations and discussions were frequently interrupted by children's activities or needs and were redirected to new topics in mid-stream. The children did not cry during the session with the exception of the twins who each became hungry on two different occasions. The toddlers played well together and the babies appeared to be actively involved in the session. Although this session was confusing for the author to record due to all of the simultaneously occurring events, there was also a sense of comfortable rapport between the Moms and a purposeful sharing of information.

Session five was originally planned as an open session (See Chapter IV: Program Outline). Open sessions were periodically provided throughout the 12 week course to enable the program participants an opportunity to determine the session topic. In the event that the program participants did not have a topic preference, the group leader had suggestions for topics planned in advance. The pre-planned topic for this session concerned babysitters; resources for finding one; training your own; and setting up a babysitting cooperative.

Given the unexpected circumstances of having to hold the meeting in the child-care room and the fire drill episode, a more flexible kind of session developed. The discussions that occurred flowed freely between the group participants and group leader. The role of the group leader was one of group facilitator. She helped to keep the discussions moving and informative, she periodically redirected the discussions to include quieter group participants, and clearly took charge in an authoritative and effective manner during the fire alarm crisis. In more subtle ways the group leader served as an effective model of positive parenting skills and supportive interpersonal behaviors. For example, she occasionally came into the meeting room with a participant's baby (taken from the child-care room) and would cuddle and play with the baby for an extended period of time. She helped unbundle babies and would check with mothers in a non-threatening and empathetic manner concerning their personal concerns. In the author's opinion, this particular Mom's Group program had some of the most spontaneous and familiar kinds of interpersonal exchanges happening amongst group members during the twelve week course. In part, this undoubtedly can be attributed to the leader's experience in the area of group process and leadership skills.

As evidenced from the group leader's personal records, it is interesting to note that the leader was unhappy and apologetic regarding this session.

> "Bit of a mess - no sitters - ended up in the nursery with the kids walking and fighting over us. I was really disoriented - can't even remember much of the session. Some talk on nutrition, behavior/discipline. Seemed most of the session was small group chatting - Sorry."

Concluding Comments

It is the author's opinion that the session did have value for the majority of the group members even though the circumstances were less than ideal. The participants offered support to the leader. There were no verbal complaints regarding the meeting room and they seemed understanding of her state of disorientation. For example, one mother stated it didn't matter the group leader couldn't recall the guest speaker for the next session. Finally, none of the participants left at the close of the program (11:30 a.m.). All participants stayed until 12:00 noon and several remained beyond that time. Perhaps an occasional unstructured session is a strength. It provides an opportunity for spontaneous kinds of exchanges that may not take place in more structured sessions.

In conclusion, it is the author's opinion that this session met the intended course objectives in the following ways:

1) It provided an opportunity for group participants to meet together in an informal setting to share and discuss common concerns.

2) It provided practical relevant information about parenting.

3) It stimulated the occurrence of social networking as evidenced when program participants remained to exchange ideas beyond the allotted program time and apart from the direction of the program leader.

Chapter VI

FINDINGS OF THE INQUIRY

Introduction

The purpose of this chapter is to present a detailed description of the data received from the 42 program participants and four group leaders who completed the program evaluation questionnaires. Each of the two questionnaires will be discussed individually. Also included in this chapter is a description of the data obtained using participant observation techniques. This information will complement the individual questions from the questionnaires whenever such information is appropriate. In addition, one major category of data obtained using participant observation techniques will be presented in detail. These findings will follow the section summarizing the participants' questionnaire.

In the analysis of the questionnaires, simple frequency distributions were tabulated for all responses to all questions. These frequencies were cross-tabulated by program for each of the four programs. Due to the limited sample size, tests of significance were not applied. An analysis of the number and percentage of questionnaire returns for each program is summarized in Table 1.

The survey items will be discussed individually. For open-ended questions in the participants' questionnaires, the responses were categorized prior to frequency tabulation. In most cases, frequencies will be reported as percentages of the total sample. They will also be reported as percentages of the population of each subgroup program. So as to present tables that are clear and concise, and because differences among the responses of program sub-groups were not statistically significant, sub-group totals are not always provided. In other cases, the data will be reported in the form of mean averages and ranges. All survey items in the leaders' questionnaire will be reported in the form of a summary due to the small number of group leaders in the sample.

Participant Questionnaire

A detailed description of the data received from the participants' questionnaires will be presented in the following section. Survey items will be discussed individually and, whenever appropriate, will include

TABLE 1

Percentage of Responses to Questionnaires

Program	Number in Total Population	Number of Responses	Percentage Response
TOTAL	50	46	92
Program #1	8	6	75
Program #2	13	12	92.31
Program #3	13	13	100
Program #4	12	11	91.67
Leaders	4	4	100

information obtained using participant observation techniques.

Part A: Evaluation of the Mom's Group

A-1 Major positive effects of the program. The information contained in Table 2 indicates that 59.5% of all respondents valued the Mom's Group Program as a social outing. There were 57.1% who found it to be a supportive activity, 52.4 % gained information about child development and raising children, while 16.7% valued it as a social outing for children. Only 2.4% of the responses could not be categorized on the basis of the information given.

Program one respondents most highly valued the program as a social outing. Program two respondents found the program to be most useful for information about child development and raising children and as a supportive activity. The majority of respondents in program three and four most highly valued the program as a social outing for parents, a supportive activity, and for providing information about child development and raising children. Table 2 illustrates the complete percentage breakdown of responses by program.

TABLE 2

Percentage Breakdown of Responses to Question A-1

Major positive effects of the program

Response Categories	Total (N=42)	Program 1 (N=6)	Program 2 (N=12)	Program 3 (N=13)	Program 4 (N=11)
1.Gained information about child development and raising children	52.4	16.7	66.7	53.8	54.5
2.Social outing for parents	59.5	50.0	33.3	69.2	81.8
3.Social outing for children	16.7	16.7	8.3	15.4	27.3
4.Supportive activity	57.1	33.3	58.3	53.8	72.7
5.Cannot determine on basis of information given	2.4	0.0	8.3	0.0	0.0

Comments made by program participants relating to the category "social outing" most frequently included; getting out of the house, making new friends, companionship, or being able to meet and socialize with other mothers having similar interests and concerns.

> "An opportunity to meet new people; other mothers in my similar situation for companionship and identification."

The majority of comments concerning the program as a supportive activity dealt with sharing experiences and concerns.

> "It made me realize that I'm not alone with my feelings about children and being a homemaker - the joys and disappointments are the same for most mothers."

Numerous comments expressed surprise and comfort that other mothers also experienced negative feelings and had doubts and questions concerning parenthood. The program provided an opportunity for parents to express themselves and talk about their experiences and problems with their children. Some mentioned that being able to get away from their child temporarily was supportive.

Another mother expressed appreciation for being able to identify with others in similar situations.

> "I could get together with other ladies and talk about babies as much as I wanted and there was no one to say I was boring or that I was uninteresting."

Gaining information about child development and raising children was also important for many participants and the kinds of information valued varied. For some, the program offered a chance to share ideas about child rearing with other new mothers, in addition to "seeing other children at various stages of development and 'comparing notes'".

> "I learned about things I never dreamed would happen with my daughter concerning development."

Appreciation was expressed for having received information concerning the resources available for parents to help them learn about raising children. The guest speakers were also valued for their information and presentations.

> "Bringing in guest speakers helped to define a lot

of questions I had about children. It has helped me to be a better and more understanding mother."

A-2 Areas of concern about the program. Table 3 indicates 26.2% of all respondents had concerns about child care, 14.3% desired organizational changes, 11.9% wanted course content changes, and 9.5% wanted the program to be continued or extended. Only 2.4% of the total responses could not be categorized on the basis of the information given.

Child care concerns were reported by a clear 66.7% majority of respondents in program two. There were no child-care concerns reported by program four respondents. However, program four mothers met in the leader's home and the majority of the mothers chose to care for their own babies. Overall, program four respondents reported few concerns about the program.

Expressed concerns about child care most often dealt with the need for additional and better qualified sitters, and the need for more space. Some mothers were concerned some meetings did not have babysitters at all or babysitting services were not regular. One mother was unwilling to leave her child in such a "small room" and especially because "some mothers brought children with

TABLE 3

Percentage Breakdown of Responses to Question A-2

Areas of concern about the program

Response Categories	Total (N=42)	Program 1 (N=6)	Program 2 (N=12)	Program 3 (N=13)	Program 4 (N=11)
1.Child-care concerns	26.2	16.7	66.7	15.4	0.0
2.Course content changes	11.9	16.7	16.7	7.7	9.1
3.Organizational changes	14.3	16.7	16.7	23.1	0.0
4.Course continuation and/or extension	9.5	0.0	8.3	7.7	18.2
5.Cannot determine on basis of information given	2.4	16.7	0.0	0.0	0.0

bad colds".

The most common comments about organizational concerns dealt with the wide age span of the children involved in the program. Participants felt that mothers with newborns and mothers with toddlers had very different immediate concerns and areas of interest. One participant felt it was too difficult to obtain information concerning the program and suggested that program information be posted in doctors' offices or hospitals. Another found the location of the programs to be a problem as she had to commute a long distance to partake in the program.

Course content concerns tended to vary according to the respondent. Some criticisms concerned "no commitment of what is best for baby", "no center theme", "more input from group as to what they want done in the program", "more planned things", "not enough substance", and "some speakers not tuned into the group".

Some program participants found the time to be too short for sessions. Another thought the course should be longer to allow for more guest speakers. One mother was concerned "it will all stop when the group stops meeting - attendance was sporadic and I'm not sure that real friendships were formed."

A-3 Suggested changes for the program. As noted in Table 4, 31% of all respondents desired organizational changes in the program, 16.7% wanted course content changes, 11.9% wanted child-care improvements, and 7.1% desired course continuation and/or extension. All of the responses provided were categorized.

A majority of respondents from program one and three desired organizational changes. The most commonly mentioned organizational change for all programs concerned grouping mothers with similar concerns together in future programs (for example, mothers with newborns, mothers with toddlers, single mothers). Other suggestions included presenting a course outline to participants at the first or second meeting, providing a list of participants' names, addresses and phone numbers for distribution earlier in the program, and offering the booklet "Smiles and Tears" at the beginning of the program.

The course content change most commonly mentioned was having more time and access to available resources for parents in the City of Edmonton. Other suggestions were more speakers, taking field trips to places such as

TABLE 4

Percentage Breakdown of Responses to Question A-3

Suggested changes for the program

Response Categories	Total (N=42)	Program 1 (N=6)	Program 2 (N=12)	Program 3 (N=13)	Program 4 (N=11)
1.Child-care improvements	11.9	16.7	16.7	15.4	0.0
2.Course content changes	16.7	0.0	16.7	23.1	18.2
3.Organizational changes	31.0	66.7	8.3	53.8	9.1
4.Course continuation and/or extension	7.1	0.0	16.7	7.7	0.0
5.Cannot determine on basis of information given	0.0	0.0	0.0	0.0	0.0

the zoo or playground, and having different activities planned for each week such as fitness and crafts. One respondent suggested the program leader support particular philosophies and ideas concerning topics such as breastfeeding, nutrition, birth, and psychological development of the child.

The comments related to child care were similar to the concerns expressed in question A-2: more babysitters and more space. One participant recommended the infants be separated from the toddlers while another thought the children should play in the same room as the mothers.

A-4 Rating the helpfulness of the program. As shown in Table 5, 52.4% of all respondents rated the program as good and 21.4% of respondents rated the program as excellent. The program was rated as fair by 14.3% of the respondents and 2.4% thought it was poor. There were 9.5% of the responents who did not express their opinion.

A clear majority of 81.8% of respondents in program four rated the program as good or excellent. In program three, 76.9% of the participants thought the program was good or excellent, while 75% and 50% of respondents in programs two and one, respectively, rated the program as good or excellent.

TABLE 5

Percentage Breakdown of Responses to Question A-4

Rating the helpfulness of the program

Respondents	1 No Opinion	2 Poor	3 Fair	4 Good	5 Excellent
Total (N=42)	9.5	2.4	14.3	52.4	21.4
Program 1 (N=6)	0.0	16.7	33.3	33.3	16.7
Program 2 (N=12)	16.7	0.0	8.3	50.0	25.0
Program 3 (N=13)	7.7	0.0	15.4	61.5	15.4
Program 4 (N=11)	9.1	0.0	9.1	54.5	27.3

A-5 Meeting with the Mom's Group once a week. As can be seen from Table 6, 88.1% of all respondents reported that meeting with the Mom's Group once a week was often enough. However, 7.1% would like to meet more often than once a week and 2.4% believed meeting once a week was too often. Finally, 2.4% of respondents did not reply to this question.

A clear majority of respondents in each of the four programs thought weekly meetings with the Mom's Group was often enough.

A-6 Meeting with the Mom's Group for 12 weeks. The data in Table 7 indicates 57.1% of all respondents thought meeting with the Mom's Group for 12 weeks was often enough. There were 35.7% of the respondents who would like to have met for longer than 12 weeks, 2.4% thought 12 weeks was too long, and 4.8% did not reply to this question.

A clear majority of respondents in program one and four reported that a 12 week program was long enough, 58.3% of program two respondents and 38.5% of program three respondents reported that 12 weeks was not often enough. Only one program participant thought meeting for 12 weeks was too often.

TABLE 6

Percentage Breakdown of Responses to Question A-5

Meeting with the Mom's Group once a week

Respondents	No Response	Too Often	Often Enough	Not Often Enough
Total (N=42)	2.4	2.4	88.1	7.1
Program 1 (N=6)	0.0	0.0	100.0	0.0
Program 2 (N=12)	0.0	0.0	83.3	16.7
Program 3 (N=13)	7.7	0.0	84.6	7.7
Program 4 (N=11)	0.0	9.1	90.9	0.0

TABLE 7

Percentage Breakdown of Responses to Question A-6

Meeting with the Mom's Group for 12 weeks

Respondents	No Response	Too Often	Often Enough	Not Often Enough
Total (N=42)	4.8	2.4	57.1	35.7
Program 1 (N=6)	0.0	0.0	83.3	16.7
Program 2 (N=12)	0.0	0.0	41.7	58.3
Program 3 (N=13)	7.7	0.0	53.8	38.5
Program 4 (N=11)	9.1	9.1	63.6	18.2

A-7 Finding out about the program. Table 8 indicates that 33.3% of all respondents found out about the program from a friend or relative, 31% were informed about the program from a newspaper advertisement, 16.7% from a health unit or nurse, and 16.7% from other sources. Finally, 2.4% of all respondents chose not to respond to this question.

A friend or relative was the most common means of being informed about the program for participants in programs two and four. A clear majority of members in program one found out about the program through newspaper advertisements, whereas, program three members most commonly heard about the program through a health unit or nurse. Other mentioned ways of finding out about the program were from a doctor, a midwife, a La Leche League meeting, a pamphlet picked up at a store, a flyer, or a group leader.

A-8 Recommending the program to others. Table 9 indicates that 92.9% of all respondents reported they would recommend the Mom's Group to others. Only 2.4% of respondents would not recommend the program to others and 4.8% did not reply to this question.

TABLE 8

Percentage Breakdown of Responses to Question A-7

Finding out about the program

Respondents	No Response	Newspaper Advertisement	Friend or Relative	Health Unit/ Nurse	Other
Total (N=42)	2.4	31.0	33.3	16.7	16.7
Program 1 (N=6)	0.0	66.7	16.7	0.0	16.7
Program 2 (N=12)	0.0	25.0	41.7	8.3	25.0
Program 3 (N=13)	7.7	23.1	15.4	38.5	15.4
Program 4 (N=11)	0.0	27.3	54.5	9.1	9.1

TABLE 9

Percentage Breakdown of Responses to Question A-8

Recommending the program to others

Respondents	No Response	Yes	No
Total (N=42)	4.8	92.9	2.4
Program 1 (N=6)	0.0	83.3	16.7
Program 2 (N=12)	8.3	91.7	0.0
Program 3 (N=13)	7.7	92.3	0.0
Program 4 (N=11)	0.0	100.0	0.0

An overwhelming majority of respondents in all programs agreed they would recommend the program to others. Only one respondent from the total sample indicated she would not recommend the program to anyone else.

A-9 Rating the group leader - Knowledge of material presented. Table 10 indicates 54.8% of all respondents rated the leader's knowledge of material as good, 28.6% rated the leaders excellent, 2.4% thought the leaders' knowledge of material presented was fair, and 7.1% thought it was poor. There were 7.1% of respondents who did not rate the leaders on this aspect.

Program four participants gave their leader the highest rating with a 54.5% rating of excellent and 45.5% rating of good. Program one participants were least generous in their ratings with 50.0% good and 0.0% excellent. Program two and three participants were quite similar in their ratings giving 58.3% and 61.5% good and 25.0% and 23.1% excellent, respectively.

A-9 Rating the group leader - Leadership style and techniques. On leadership style and techniques (see Table 11), 42.9% of all respondents rated the leader as

TABLE 10

Percentage Breakdown of Responses to Question A-9

Rating the group leader - Knowledge of material presented

Respondents	No Opinion	Poor	Fair	Good	Excellent
Total (N=42)	7.1	7.1	2.4	54.8	28.6
Program 1 (N=6)	0.0	33.3	16.7	50.0	0.0
Program 2 (N=12)	8.3	8.3	0.0	58.3	25.0
Program 3 (N=13)	15.4	0.0	0.0	61.5	23.1
Program 4 (N=11)	0.0	0.0	0.0	45.5	54.5

TABLE 11

Percentage Breakdown of Responses to Question A-9

Rating the group leader - Leadership style and techniques

Respondents	No Opinion	Poor	Fair	Good	Excellent
Total (N=42)	11.9	2.4	9.5	42.9	33.3
Program 1 (N=6)	16.7	16.7	50.0	16.7	0.0
Program 2 (N=12)	16.6	0.0	8.3	33.3	41.7
Program 3 (N=13)	15.4	0.0	0.0	69.2	15.4
Program 4 (N=11)	0.0	0.0	0.0	36.4	63.6

good, 33.3% excellent, 9.5% fair and 2.4% poor. Of those responding, 11.9% did not answer this question.

Again, program four respondents provided their leader with the highest ratings of 63.6% excellent and 36.4% good. Program 2 participants followed with ratings of 41.7% excellent and 33.3% good. Program 3 participants rated the leadership style and techniques as 69.2% good and 15.4% excellent. Program one participants were the least generous giving the leader a rating of 50.0% fair and 16.7% good.

A-9 Rating the group leader - Ability to create a comfortable atmosphere. The data in Table 12 shows 64.3% of all respondents rated their leader's ability to create a comfortable atmosphere as excellent, 21.4% good, 2.4% fair, and 2.4% poor. There were 9.5% of the respondents who did not reply to this question.

A clear majority of respondents in programs two, three, and four rated their leader's ability to create a comfortable atmosphere as excellent. The majority of program one members rated their leader as good.

TABLE 12

Percentage Breakdown of Responses to Question A-9

Rating the group leader - Ability to create a comfortable atmosphere

Respondents	No Opinion	Poor	Fair	Good	Excellent
Total (N=42)	9.5	2.4	2.4	21.4	64.3
Program 1 (N=6)	0.0	16.7	0.0	50.0	33.3
Program 2 (N=12)	16.6	0.0	0.0	16.7	66.7
Program 3 (N=13)	15.4	0.0	0.0	23.1	61.5
Program 4 (N=11)	0.0	0.0	9.1	9.1	81.8

A-9 Rating the group leader - Overall competency. As evident from Table 13, 42.9% of all respondents rated the group leaders as good in overall competency. Forty point five per cent reported the leaders to be excellent, 2.4% fair, 2.4% poor, and 11.9% of the total sample did not respond to this question.

The majority of participants in each of the four programs rated their leader as good or excellent in overall competency. Program four members were most generous with 72.7% rating their leader as excellent.

A-10 Reading "Smiles and Tears". The information contained in Table 14 indicates a 57.1% majority of all respondents did not read the parent handbook designed to accompany the program. However, 21.4% read it carefully once, 4.8% read it carefully more than once, while 4.8% read it quickly once, and 2.4% read only parts of the book. There was no reply to this question from 9.5% of the respondents.

A very significant percentage of respondents throughout the four programs did not read the parent handbook. This may be due to the fact that the handbook was in publication during the early stages of program

TABLE 13

Percentage Breakdown of Responses to Question A-9

Rating the group leader - Overall competency

Respondents	No Opinion	Poor	Fair	Good	Excellent
Total (N=42)	11.9	2.4	2.4	42.9	40.5
Program 1 (N=6)	16.7	16.7	0.0	50.0	16.7
Program 2 (N=12)	16.6	0.0	0.0	50.0	33.3
Program 3 (N=13)	15.4	0.0	0.0	53.8	30.8
Program 4 (N=11)	0.0	0.0	9.1	18.2	72.7

TABLE 14

Percentage Breakdown of Responses to Question A-10

Reading Smiles and Tears

Respondents	No Response	Read Carefully Once +	Read Carefully Once	Read Quickly Once	Read Parts	Did not Read
Total (N=42)	9.5	4.8	21.4	4.8	2.4	57.1
Program 1 (N=6)	0.0	0.0	0.0	0.0	0.0	NA*
Program 2 (N=12)	16.7	0.0	16.7	0.0	8.3	58.3
Program 3 (N=13)	15.4	7.7	15.4	15.4	0.0	46.2
Program 4 (N=11)	0.0	9.1	45.5	0.0	0.0	45.5

* Information not applicable as program participants did not receive the books.

operation. They were not distributed to the program leaders until just prior to the termination of the program. By program completion, many of the total sample population did not receive the handbooks. If they received the books, they had little time to read them. Table 14 indicates program one respondents did not read the guide. In this program, the guides were not distributed to participants before the program terminated.

A-11 Rating the helpfulness of "Smiles and Tears". Table 15 indicates that a 69.1% majority of all respondents had no opinion in regard to rating the helpfulness of the parent handbook entitled Smiles and Tears. There were 16.7% of respondents who rated the book good, 7.1% excellent, 4.8% poor, and 2.4% fair.

The data in Table 15 shows all respondents in program one and a majority of respondents in programs two, three and four had no opinion concerning the helpfulness of the program handbook. This is likely due to the late dispersal of the booklets to the programs and the fact many participants did not receive the book at all.

Repeated comments concerning the booklet stated the book was very general with little new information.

TABLE 15

Percentage Breakdown of Responses to Question A-11

Rating the helpfulness of Smiles and Tears

Respondents	No Opinion	Poor	Fair	Good	Excellent
Total (N=42)	69.1	4.8	2.4	16.7	7.1
Program 1 (N=6)	NA*	0.0	0.0	0.0	0.0
Program 2 (N=12)	75.0	8.3	0.0	8.3	8.3
Program 3 (N=13)	61.5	7.7	7.7	15.4	7.7
Program 4 (N=11)	54.5	0.0	0.0	36.4	9.1

* Information not applicable as program participants did not receive the books.

> "As I had done a great deal of reading prior, during, and after my pregnancy, it provided no new information."

Other respondents found it most helpful to parents with younger babies.

> "Since our child is 2 years, the book would have been more helpful at an earlier age."

Several respondents reported finding the booklet helpful and enjoyable reading.

A-12 Using the child-care services. The information contained in Table 16 indicates that 33.3% of all respondents frequently used the child-care services offered at the Mom's Group Program. There were 33.3% of the respondents who did not use the services, 23.8% used them sometimes, and 9.5% did not reply to this question.

The majority of program one, two, and three participants used the child-care services frequently or at times. In program four, 81.8 % of the participants did not use the services. Program four meetings were held in the leader's home and most of these mothers

TABLE 16

Percentage Breakdown of Responses to Question A-12

Using the child-care services

Respondents	No Response	Yes Frequently	Yes Sometimes	No
Total (N=42)	9.5	33.3	23.8	33.3
Program 1 (N=6)	16.7	50.0	16.7	16.7
Program 2 (N=12)	8.3	25.0	41.7	25.0
Program 3 (N=13)	15.4	53.8	23.1	7.7
Program 4 (N=11)	0.0	9.1	9.1	81.8

preferred to care for their own children during the meetings.

A-13 Rating the helpfulness of the child-care services. As may be seen from Table 17, 40.5% of all respondents had no opinion about rating the child-care services. There were 23.8% who found the services to be fair, 21.4% good, 9.5% excellent, and 4.8% poor.

The majority of participants in program four did not have an opinion about rating the child-care services. As stated previously, few mothers chose to use the services. There were 50% of program one respondents who chose not to rate the services for reasons unknown to the reporter. Program two participants most commonly rated the services as fair (41.7%) whereas, 46.2% of program three participants rated the services as good or excellent.

The majority of comments related to this question criticized the child-care services. Respondents reported the services to be poor in quality, irregular, and uninteresting for children. One program four mother suggested the services were "unnecessary and the cost of the program would be less if it was eliminated." One participant stated "They couldn't look after the babies

TABLE 17

Percentage Breakdown of Responses to Question A-13

Rating the helpfulness of the child-care services

Respondents	No Opinion	Poor	Fair	Good	Excellent
Total (N=42)	40.5	4.8	23.8	21.4	9.5
Program 1 (N=6)	50.0	0.0	16.7	16.7	16.7
Program 2 (N=12)	33.3	8.3	41.7	16.7	0.0
Program 3 (N=13)	23.1	7.7	23.1	30.8	15.4
Program 4 (N=11)	63.6	0.0	9.1	18.2	9.1

(for example, feed or change) so throughout meetings I had the distraction of looking after my child and trying to participate at the same time which I personally found hard to do with my first new-born child."

A-14 Comparing information from the Mom's Group with other sources. In Table 18, comparing information received from relatives with the information received from the Mom's Group, 31.0% of all respondents found the information from relatives less helpful than the Mom's Group, 26.2% found it about the same, 21.4% found it more helpful, and 14.3% never use information from relatives. There was no reply to this question from 7.1% of the respondents.

The information received from friends was reported to be about the same as the Mom's Group from 40.5% of all respondents, 23.8% found it less helpful, 21.4% found it more helpful, and 7.1% reported they never use information from friends. There were 7.1% who did not respond to the question.

Of those responding, 31.3% found information received from neighbors less helpful than the Mom's Group, 28.6% never use information from neighbors, 23.8% found it about the same, and 7.1% found it more helpful.

TABLE 18

Percentage Breakdown of Responses to Question A-14

Comparing information from the Mom's Group with other sources

	No Response	Never use so no comparison can be made	Less helpful than Mom's Group	More helpful than Mom's Group	About the same as Mom's Group
Relatives	7.1	14.3	31.0	21.4	26.2
Friends	7.1	7.1	23.8	21.4	40.5
Neighbors	7.1	28.6	33.3	7.1	23.8
Doctor	7.1	9.5	14.3	35.7	33.3
Community Health Nurse	7.1	11.9	21.4	26.2	33.3
Counsellor or Social Worker	11.9	73.8	7.1	2.4	4.8
Books and Magazines	4.8	7.1	9.5	31.0	47.6
Parenting Course	9.5	80.9	0.0	4.8	4.8
Television and Radio	4.8	38.1	28.6	7.1	21.4

(N = 42)

There were 7.1% who did not reply to this question.

The information received from the doctor was reported to be more helpful than the Mom's Group by 35.7% of all respondents, 33.3% found it to be about the same, 14.3% found it to be less helpful, and 9.5% reported they never use information from the doctor. There were 7.1% who did not answer this question.

Table 18 indicates that 33.3% of all respondents found information received from the Community Health Nurse was about the same as the Mom's Group, 26.2% found it more helpful, and 21.4% found it less helpful. Further, 11.9% never use information from the Community Health Nurse and 7.1% of respondents did not respond to this question.

In comparing the information received from a counsellor or social worker, 73.8% of respondents indicated they never use such information so no comparison can be made. There were 11.9% of all respondents who did not reply to this question, 7.1% indicated the information received was less helpful than the Mom's Group, 4.8% found it about the same, and 2.4% found it more helpful than the Mom's Group.

Information in books and magazines was found by 47.6% of all respondents to be about the same in terms of helpfulness as the Mom's Group Program. There were 31% of the respondents who found books and magazines to be more helpful than the Mom's Group, 9.5% found them less helpful, 7.1% do not use them, and 4.8% did not answer this question.

Of those responding, 80.9% had never used a parenting course, 9.5% did not respond to the question, and 4.8% found the Mom's Group to be about the same as a parenting course. No one found the Mom's Group to be less helpful.

Television and radio were not used by 38.1% of all respondents so a comparison could not be made. However, 28.6% found them less helpful, 21.4% found them about the same as the Mom's Group, 7.1% found them more helpful, and 4.8% of respondents did not reply to this question.

A-15 Talking about what happens in a Mom's Group with others living in the household. The data in Table 19 indicates 95.2% of all respondents discuss what happens in the program with their husbands or male friends, 9.5% with another adult living in the home and

TABLE 19

Percentage Breakdown of Responses to Question A-15

Talking about what happens in a Mom's Group with others living in the household

Respondents	No Response	No One	My Child(ren)	My Husband (or man friend)	Other Adult living in my home
Total (N=42)	4.8	0.0	7.1	95.2	9.5

(Respondents asked to circle one or more choices)

7.1% with their children. There were 4.8% who did not answer the question. (Respondents were able to respond to one or more choices, therefore the percentages will vary.)

A-16 Talking about what happens in a Mom's Group with friends or relatives. As shown in Table 20, 64.3% of all respondents indicated they sometimes discuss what happens in a Mom's Group with friends or relatives, 28.6% said they often do, and 7.1% did not respond to the question.

A-17 Turning for help in making decisions. Table 21 indicates 95.2% of all respondents reported they turn to their husband or male partner for help in making decisions concerning their children and 40.5% turn to friends. The data further indicates 28.6% reported turning to others (such as professionals, agencies, community resources, and so forth), 26.2% turn to relatives, 21.4% seek help from their own parents, and 4.8% do not seek advice from anyone when making decisions. Finally, 2.4% of all respondents did not reply to the question. (Respondents were asked to circle one or more choices in this question).

TABLE 20

Percentage Breakdown of Responses to Question A-16

Talking about what happens in a Mom's Group
with friends or relatives

Respondents	No Response	No	Yes Rarely	Yes Sometimes	Yes Often
Total (N=42)	7.1	0.0	0.0	64.3	28.6

TABLE 21

Percentage Breakdown of Responses to Question A-17

Turning for help in making decisions

Respondents	No Response	No One	Husband or male partner	My Own Parents	Other Relatives	Friends	Others
Total (N=42)	2.4	4.8	95.2	21.4	26.2	40.5	28.6

(Respondents asked to circle one or more choices)

A-18 Most important needs since the birth of the baby. According to Table 22, 40.5% of all respondents reported that their most important need since the birth of the baby was having time for themselves. There were 38.1% who indicated a need for support, 35.7% needed social outlets, 19.0% wanted time for their husbands, and 16.7% of the responses could not be categorized on the basis of the information given. In addition, 11.9% of respondents had a need for personal development, 9.5% reported having sleep and health needs, 7.1% required information on child development and raising children, while 7.1% needed babysitting services.

In terms of support, the most common comments expressed a need for someone to talk to ... "to share experiences" and "to help with problems or concerns". Equally common were comments concerning the need for reassurance and confidence in their role as new mothers.

> "the need to know I am doing the right thing for my baby."

One participant expressed a need for a break from the constant care of two small children while another felt a need for the presence of relatives or parents close by.

TABLE 22

Percentage Breakdown of Responses to Question A-18

Most important needs since the birth of the baby

Response Categories	Total (N=42)	Program 1 (N=6)	Program 2 (N=12)	Program 3 (N=13)	Program 4 (N=11)
1.Need information on child development and raising children	7.1	0.0	8.3	15.4	0.0
2.Need for social outlets	35.7	33.3	16.7	46.2	45.5
3.Need for support	38.1	16.7	50.0	38.5	36.4
4.Need time for self	40.5	50.0	50.0	46.2	18.2
5.Need time for husband	19.0	0.0	33.3	30.8	0.0
6.Need for personal development	11.9	16.7	0.0	7.7	27.3
7.Sleep and health needs	9.5	16.7	0.0	15.4	9.1
8.Need for babysitting services	7.1	0.0	0.0	15.4	9.1
9.Cannot determine on basis of information given	16.7	0.0	25.0	7.7	27.3

Adult conversation, friends, and visitors were mentioned as social outlet needs.

> "Friends calling to remind me that there is still a world out there."

A-19 Learning about the development and care of children. Table 23 indicates 40.5% of all respondents gained information about child development and raising children from the program, 28.6% gained reassurance and/or support in their role as a parent, and 16.7% developed more self-awareness in their role as a parent and/or the program assisted them to become better a parent. Finally, 2.4% of the responses could not be categorized on the basis of the information given.

The majority of the comments about the kinds of information participants appreciated dealt with the recognition that children are unique and they go through various developmental stages at their own rate and time.

> "How unfair it is to compare our child with others. Each child is an individual and should be treated as such."

TABLE 23

Percentage Breakdown of Responses to Question A-19

Learning about the development and care of children

Response Categories	Total (N=42)	Program 1 (N=6)	Program 2 (N=12)	Program 3 (N=13)	Program 4 (N=11)
1. Gained information about child development and raising children	40.5	0.0	58.3	53.8	27.3
2. Gained reassurance/ support in role as parent	28.6	33.3	33.3	23.1	27.3
3. Developed more self-awareness in role as parent and/or assisted to become a better parent	16.7	16.7	0.0	15.4	36.4
4. Cannot determine on basis of information given	2.4	0.0	0.0	7.7	0.0

Health and nutrition, discipline, ideas on parenting, and hints from other moms were most often cited as the kinds of information found to be valuable.

In gaining reassurance and support in their role as a parent, respondents valued discovering most parents have similar concerns and doubts regarding parenthood, and that their children are normal. One respondent stated that it was "encouraging to have what I know reinforced by others."

A-20 Feeling more comfortable in role as a parent. As evident from Table 24, 73.8% of all respondents reported that the Mom's Group Program helped them to feel more comfortable in their role as a parent while 14.3% said the program did not help them feel more comfortable as a parent. There were 11.9% of respondents who did not reply to this question.

A-21 Rating information provided in the Mom's Group. The information contained in Table 25 shows that 38.1% of all respondents rated the information provided on the relationship that parents have with each other as good, 28.6% rated it as fair, 21.4% of all respondents did not give their opinion, 9.5% thought it was excellent, and 2.4% thought it was poor.

TABLE 24

Percentage Breakdown of Responses to Question A-20

Feeling more comfortable in role as a parent

Respondents	No Response	Yes	No
Total (N=42)	11.9	73.8	14.3
Program 1 (N=6)	33.3	33.3	33.3
Program 2 (N=12)	8.3	83.3	8.3
Program 3 (N=13)	7.7	69.2	23.1
Program 4 (N=11)	9.1	90.9	0.0

TABLE 25

Percentage Breakdown of Responses to Question A-21

Rating information provided in the Mom's Group

Responses	No Opinion	Poor	Fair	Good	Excellent
1. Parents relationship with each other	21.4	2.4	28.6	38.1	9.5
2. Understanding your own needs and taking care of them	11.9	4.8	4.8	61.9	16.7
3. Feeling that being a parent is an important job.	11.9	0.0	7.1	40.5	40.5
4. Learning about ways of being a better parent	9.5	0.0	14.3	45.2	31.0
5. Understanding the importance of being physically fit	21.4	9.5	38.1	28.6	2.4
6. Learning about a child's physical, emotional, social and mental development	16.7	2.4	21.4	45.2	14.3
7. Understanding how children learn	19.0	2.4	38.1	35.7	4.8
8. How and when to discipline children	19.0	0.0	38.1	28.6	14.3

TABLE 25
(cont'd)

Responses	No Opinion	Poor	Fair	Good	Excellent
9.How to recognize when to go for outside help (doctor,counsellors, etc.)	23.8	7.1	31.0	28.6	9.5
10.How and what to feed children	14.3	4.8	31.0	38.1	11.9
11.How to choose and use babysitters and day care	16.6	9.5	26.2	38.1	9.5
12.How to handle special problems (such as crying, teething, and toilet training)	16.7	0.0	28.6	52.4	2.4
13.Suggestions of books to read for more information	9.5	2.4	7.1	38.1	42.9
14.Suggestions of community resources to seek for more information	11.9	2.4	19.0	40.5	26.2
15.Knowing that other parents share some of your feelings	9.5	0.0	4.8	23.8	61.9
16.Understanding about isolation and the importance of making connections with people	11.9	0.0	11.9	23.8	52.4
17.Learning about other ways of dealing with your children and social environments	14.3	2.4	11.9	52.4	19.0

(N=42)

In rating the information given concerning understanding your own needs and taking care of them, 61.9% of respondents rated it as good, 16.7% excellent, 11.9% did not respond, 4.8% poor, and 4.8% fair.

The information received about feeling that being a parent is an important job was rated excellent by 40.5% of respondents. In addition, 40.5% rated this information as good, 11.9% did not respond, and 7.1% thought it was fair.

There were 45.2% of respondents who rated learning about ways of being a better parent as good, 31.0% excellent, and 14.3% fair. There were 9.5% of respondents who did not answer this question.

The information received about understanding the importance of being physically fit was rated fair by 38.1% of respondents. There were 28.6% who considered this information to be good, 21.4% did not respond, 9.5% rated it poor, and 2.4% excellent.

The information concerning learning about a child's physical, emotional, social, and mental development was rated by 45.2% as good, 21.4% fair, 16.7% did not respond, 14.3% excellent, and 2.4% poor.

In rating the information about understanding how children learn, 38.1% of respondents rated it fair, 35.7% good, 19.0% did not respond, 4.8% excellent, and 2.4% poor.

Information on how and when to discipline children was rated fair by 38.1% of respondents. There were 28.6% who rated it good, 19.0% did not respond, and 14.3% rated it excellent.

Thirty-one per cent of the respondents rated the information about recognizing when to go for outside help as fair, 28.6% good, 23.8% did not respond, 9.5% excellent, and 7.1% poor.

Information on how and what to feed children was rated as good by 38.1% of respondents, 31.0% fair, 14.3% did not respond, 11.9% rated it excellent, and 4.8% poor.

The information concerning how to choose and use babysitters and day care was rated by 38.1% of respondents as good. There were 26.2% who rated it fair, 16.6% did not respond, 9.5% rated it poor, and 9.5% rated it excellent.

The information on how to handle special problems was rated by 54.2% as good, 28.6% as fair, 16.7% did not respond, and 2.4% rated it excellent.

Suggestions of books to read for more information was reported to be excellent by 42.9% of all respondents. The information was rated as good by 38.1% of the respondents, 9.5% did not respond to the question, 7.1% rated it fair, and 2.4% rated it poor.

Suggestions of community resources to seek for more information was rated good by 40.5% of respondents. There were 26.2% who rated it excellent, 19.0% fair, 11.9% did not respond, and 2.4% rated it poor.

Knowing that other parents share some of your feelings was reported to be excellent by 61.9% of all respondents and 23.8% rated it good. There were 9.5% of the respondents who did not reply to the question and 4.8% rated this topic as fair.

Understanding about isolation and the importance of making connections with people was rated as excellent by 52.4% of respondents and 23.8% rated it good. There was no reply to this question from 11.9% of the respondents and 11.9% rated it fair.

Information concerning learning about ways of dealing with your children and social environment was reported to be good by 52.4% of respondents. There were 19% who rated it excellent, 14.3% did not respond, 11.9% rated it fair, and 2.4% rated it poor.

A-22 Hoping to gain from a Mom's Group. As shown in Table 26, 81% of all respondents initially joined the program to get out of the house. There were 69% who wanted to hear speakers and have contact with adults, 66.7% joined to let their children meet and play with other children, and 61.9% wanted to hear what being a mom is like for others. There were 59.5% of respondents who joined the group to share positive experiences and concerns about being a parent; 59.5% desired practical, relevant information and ideas about raising children; 57.1% wanted to learn more about child care and development; and 54.8% wanted to find out what resources exist for parents and children. Finally, 47.6% of respondents hoped to learn how to be a better parent and 42.9% hoped to meet new friends.

A-23 Meeting expectations about the Mom's Group. The information contained in Table 27 shows that 50.0% of all respondents gained practical, relevant information and ideas about raising children by having attended the

TABLE 26

Percentage Breakdown of Responses to Question A-22

Hoping to gain from a Mom's Group

Responses	No Response	Affirmative Response
1.To meet new friends	57.2	42.9
2.To get out of the house	19.0	81.0
3.To hear what being a mom is like for others	38.1	61.9
4.To learn how to be a better parent	52.4	47.6
5.To learn more about child care and development	42.9	57.1
6.To hear speakers and have contact with adults	31.0	69.0
7.To find out what resources exist for parents and children	45.3	54.8
8.To share positive experiences and concerns about being a parent	40.5	59.5
9.To get practical, relevant information and ideas about raising children	40.5	59.5
10.To let my child meet and play with other children	33.4	66.7
11.Other reasons	100.0	0.0

(N=42)

TABLE 27

Percentage Breakdown of Responses to Question A-23
Meeting expectations about the Mom's Group

Responses	No Response	Affirmative Response
1.I made new friends	69.0	31.0
2.I am better adjusted and more comfortable in my role as a parent	54.7	45.2
3.I am more understanding and tolerant of the needs of my child(ren) and my partner	71.4	28.6
4.I am more understanding of my own needs and better able to take care of my own needs	61.9	38.1
5.I know I can learn to to be a good parent	69.0	31.0
6.I gained practical, relevant information and ideas about raising children	50.0	50.0
7.I am more motivated to use available community resources (eg. agencies, professionals, courses,etc)	83.3	16.7
8.I am more confident that I can provide my child(ren) with a happy, healthy, safe and challenging environment	71.4	28.6
9.I am more motivated to develop supportive social contacts	71.4	28.6
10.I am more optimistic about raising children and family life	71.4	28.6
11.Other reasons	95.2	4.8

(N=42)

Mom's Group Program and 45.2% indicated they were better adjusted and more comfortable in their roles as a parent. There were 38.1% of the respondents who reported they were more understanding of their own needs and were better able to take care of their own needs while 31.0% indicated they made new friends and know they can learn to be a good parent. Further, 28.6% reported they were more understanding and tolerant of the needs of their child(ren) and their partner; they were more confident they could provide their child(ren) with a happy, healthy, safe, and challenging environment; they were more motivated to develop supportive social contacts; and they were more optimistic about raising children and family life. There were 16.7% of respondents who reported they were more motivated to use available community resources while 4.8% of respondents reported they benefited from the program for other reasons such as receiving reinforcement for the ways in which they were raising their children. One respondent stated:

> "I can identify with others easier - I do not feel so alone in my specific feelings and frustrations. The support from others has been essential to my well being."

A-24 Helpful information and support for the future. As may be seen from Table 28, 40.5% of all respondents need information about child development and raising children to help them in the future in their role as a parent. In addition, 21.4% wanted programs and/or more contact with others for mothers while 7.1% of respondents wanted more programs and/or more contact with others for their children.

The kinds of information most frequently requested concerned general information on all aspects of child care corresponding to the development of children as they grow and especially information about discipline, nutrition, and emotional growth. There was also an expressed need for more information about locating good play schools and suitable babysitters.

Several respondents reported desiring more support sessions similar to the Mom's Group where they could meet with others with similar interests and develop friendships.

> "To have a Mom's Group to meet people in the neighborhood and meet moms who may become friends of mine. In our community there aren't many young families with children so I miss the social contact

TABLE 28

Percentage Breakdown of Responses to Question A-24

Helpful information and support for the future

Response Categories	Total (N=42)	Program 1 (N=6)	Program 2 (N=12)	Program 3 (N=13)	Program 4 (N=11)
1. Need information about child development and raising children	40.5	16.7	58.3	46.2	27.3
2. Need programs and/or more contact with others for mothers	21.4	16.7	25.0	30.8	9.1
3. Need programs and/or more contact with others for children	7.1	0.0	25.0	0.0	0.0
4. Cannot determine on basis of information given	0.0	0.0	0.0	0.0	0.0

> with younger neighbors. Also, I would like to get contacts for babysitting which did not occur in the group."

One respondent reported wanting more opportunities for child interaction and activities for one and two year olds. She felt that communities were not "geared to this age group at all". One respondent requested an observation nursery for toddlers and another suggested creative play programs.

Additional Comments. Ten program participants wrote opinions and comments in the space provided. Two participants indicated the program was very valuable but needed to be more widely publicized. One of them suggested having a television interview about the program on a show like the "Barbara Kelly Show".

> "There are too many mothers in our communities who have opted to stay at home with their children and are going through massive adjustment changes. They need support and companionship."

Two other respondents indicated they were confident and well read about parenting and thus, a lot of what was covered in the program was not new to them. However, one reported that she enjoyed seeing how the program was run and hearing the various guest speakers while the other mentioned the program met her needs for social contact with other mothers.

Two other respondents indicated they were unhappy with the presentation on budget matters. They did not find the ideas presented useful.

One program participant found the program to be excellent while another was very disappointed. She was unhappy with the babysitting arrangements, the line up of program topics, and that there were no other children the age of her oldest (2 1/2 years). She also stated she was uncomfortable as she was the only mother present with two adopted children and "could not share the experience the other moms did when talking about birth and pregnancy". She wanted to see an "indoor playground" set up in the City of Edmonton.

One mother thought it would be useful to get the husbands together for one or two evenings during the program to have a discussion night. Another participant indicated she found groups like the Le Leche League and Association for Safe Alternatives in Childrearing to be very supportive.

Part B: General Information

B-1 Sessions attended. The information contained in Table 29 indicates 38.1% of all respondents attended 10 to 12 sessions of the Mom's Group Program. There were 26.2% of respondents who attended 7 to 9 sessions, 21.4% attended 4 to 6 sessions, and 11.9% attended one to three sessions. There were 2.4% who did not respond to this question.

Over 60% of program participants in each of the four programs attended one-half or more of the total number of program sessions.

B-2 Attending a course like the Mom's Group before. According to Table 30, 83.3% of all respondents had not attended a course like the Mom's Group before, 9.5% had attended one other program like the Mom's Group, while 4.8% had attended two or more other similar programs. Finally, 2.4% of all respondents did not answer this question.

All of the respondents in program one and two had not attended a course like the Mom's Group before. Two respondents in each of programs three and four had attended one other program similar to the Mom's Group and

TABLE 29

Percentage Breakdown of Responses to Question B-1

Sessions attended

Respondents	No Response	10 - 12	7 - 9	4 - 6	1 - 3
Total (N=42)	2.4	38.1	26.2	21.4	11.9
Program 1 (N=6)	0.0	33.3	33.3	0.0	33.3
Program 2 (N=12)	0.0	41.7	25.0	25.0	8.3
Program 3 (N=13)	7.7	38.5	23.1	30.8	0.0
Program 4 (N=11)	0.0	36.4	27.3	18.2	18.2

TABLE 30

Percentage Breakdown of Responses to Question B-2

Attended a course like the Mom's Group before

Respondents	No Response	Yes, one other program	Yes, two or more other programs	No
Total (N=42)	2.4	9.5	4.8	83.3
Program 1 (N=6)	0.0	0.0	0.0	100.0
Program 2 (N=12)	0.0	0.0	0.0	100.0
Program 3 (N=13)	7.7	15.4	7.7	69.2
Program 4 (N=11)	0.0	18.2	9.1	72.7

one respondent in each of programs three and four had attended two or more programs. Only one respondent in the total sample did not reply to the question.

B-3 Present role. According to Table 31, 90.5% of all respondents were homemakers, 11.9% were employed part time, 7.1% were part-time students, 7.1% were volunteer workers, and 2.4% were employed full time. There were 2.4% of the respondents who did not answer this question.

The vast majority of all respondents in each of the four programs indicated that they were homemakers.

B-4 Number of children being raised in the home. The information contained in Table 32 shows 78.6% of all respondents were raising only one child in the home, 14.3% had two children, 2.4% had three children, and 2.4% had four or more children. Only 2.4% of the total sample did not respond to the question.

The vast majority of all respondents in each of the four programs had only one child.

B-5 Number of children under 3 years of age. As indicated in Table 33, 81% of the total number of respondents were raising one child under three years of

TABLE 31

Percentage Breakdown of Responses to Question B-3

Present role

Respondents	No Response	Home-maker	Volunteer Worker	Part-Time Student	Full Time Student	Employed Part Time	Employed Full Time	Other
Total (N=42)	2.4	90.5	7.1	7.1	0.0	11.9	2.4	0.0
Program 1 (N=6)	0.0	100.0	0.0	16.7	0.0	0.0	0.0	0.0
Program 2 (N=12)	0.0	91.7	8.3	8.3	0.0	0.0	8.3	0.0
Program 3 (N=13)	7.7	84.6	15.4	7.7	0.0	15.4	0.0	0.0
Program 4 (N=11)	0.0	90.9	0.0	0.0	0.0	27.3	0.0	0.0

(Respondents asked to circle one or more choices)

TABLE 32

Percentage Breakdown of Responses to Question B-4

Number of children being raised in the home

Respondents	No Response	One	Two	Three	Four or more
Total (N=42)	2.4	78.6	14.3	2.4	2.4
Program 1 (N=6)	0.0	83.3	16.7	0.0	0.0
Program 2 (N=12)	0.0	75.0	16.7	0.0	8.3
Program 3 (N=13)	7.7	84.6	7.7	0.0	0.0
Program 4 (N=11)	0.0	72.7	18.2	9.1	0.0

TABLE 33

Percentage Breakdown of Responses to Question B-5

Number of children under 3 years of age

Respondents	No Response	One	Two	Three or more
Total (N=42)	2.4	81.0	16.7	0.0
Program 1 (N=6)	0.0	83.3	16.7	0.0
Program 2 (N=12)	0.0	75.0	25.0	0.0
Program 3 (N=13)	7.7	84.6	7.7	0.0
Program 4 (N=11)	0.0	81.8	18.2	0.0

age. There were 16.7% who were raising two children under three years of age and 2.4% of all respondents did not reply to this question.

B-6 Ages of self and mate. As can be seen from Table 34, the ages of all respondents ranged from 22 years to 42 years with a mean age of 29. The ages of the most important person the respondents lived with (husband, male friend) ranged from 25 years to 42 years with a mean age of 31. There were 2.4% of respondents who did not reply to the question of their age and 4.8% did not respond to the question regarding the age of their mates.

Program one respondents ranged in age from 23 years to 35 years with a mean age of 28. Their mates ranged in age from 28 to 36 years of age with a mean age of 32. The age range of program two respondents was from 25 years of age to 42 with a mean age of 30. Their mates ranged in age from 27 to 40 years with a mean age of 32. Program three respondents ranged in age from 22 to 34 with a mean age of 27. Their mates ranged in age from 25 to 42 years with a mean age of 31. The mean age of program four respondents was 30 with an age range of 26 to 34. Their mates ranged in age from 27 to 38 years with a mean age of 31.

TABLE 34

Responses to Question B-6

Ages of self and mate

Respondents	No Response (Self)	Age Range in Years (Self)	Mean Age (Self)	No Response (Mate)	Age Range in Years (Mate)	Mean Age (Mate)
Total (N=42)	2.4%	22-42	29	4.8%	25-42	31
Program 1 (N=6)	0.0%	23-35	28	16.7	28-36	32
Program 2 (N=12)	0.0%	25-42	30	0.0%	27-40	32
Program 3 (N=13)	7.7%	22-34	27	7.7%	25-42	31
Program 4 (N=11)	0.0%	26-34	30	0.0%	27-38	31

B-7 Education of self and mate. The education of all respondents ranged from having completed some high school to having completed some graduate level work. The mean education level for respondents was equivalent to having completed a college diploma. The mean education level of the most important person the respondents lived with (husband, male friends) was also reported to be equivalent to having a college diploma. The educational levels completed ranged from having completed some high school to having completed a graduate degree. There were 2.4% of all respondents who did not respond to the question about themselves while 4.8% of respondents did not reply to the question concerning their mates.

The educational level of program one respondents ranged from having completed high school to having completed some graduate work. The educational level of the mates of program one respondents ranged from having completed some high school to having a graduate degree. The mean educational level of program one respondents and their mates was equivalent to having completed a college diploma. Program two respondents ranged in educational level from having completed some high school to having completed some graduate work. Their mates ranged from having completed some high school to having a graduate degree. The mean educational level for program two respondents and their mates was equivalent to having completed some university or college. The educational level of program three respondents ranged from having completed high school to having completed some graduate work. Their mates ranged from having some high school to having a graduate degree. The mean educational level for program three respondents and their mates was the equivalent of a college diploma. The mean educational level for program four respondents was equivalent to having some university or college. The educational range of respondents being from having completed high school to having a university degree. Their mates ranged from having completed some high school to having completed some graduate work.

B-8 Being a home owner. In terms of being a home owner, 83.3% of all respondents owned their own homes while 14.3% did not (see Table 35). Only 2.4% of respondents did not answer this question.

The vast majority of all respondents in each of the four programs owned their own homes.

B-9 Length of time living in present community. As may be seen from Table 36, 40.5% of all respondents have

TABLE 35

Percentage Breakdown of Responses to Question B-8

Being a home owner

Respondents	No Response	Yes	No
Total (N=42)	2.4	83.3	14.3
Program 1 (N=6)	0.0	83.3	16.7
Program 2 (N=12)	0.0	83.3	16.7
Program 3 (N=13)	7.7	76.9	15.4
Program 4 (N=11)	0.0	90.9	9.1

TABLE 36

Percentage Breakdown of Responses to Question B-9

Length of time living in present community

Respondents	No Response	More Than 5 Years	2 - 5 Years	1 - 2 Years	Less Than 1 Year
Total (N=42)	2.4	16.7	40.5	23.8	16.7
Program 1 (N=6)	0.0	33.3	16.7	33.3	16.7
Program 2 (N=12)	0.0	25.0	58.3	0.0	16.7
Program 3 (N=13)	7.7	15.4	38.5	30.8	7.7
Program 4 (N=11)	0.0	0.0	36.4	36.4	27.3

lived in their present community for two to five years. The data indicated that 23.8% of the respondents had lived in their present community for one to two years, 16.7% for more than five years, and 16.7% for less than one year. There were 2.4% of all respondents who did not respond to this question.

Respondents in program two reported living in their community for the greatest length of time with 83.3% having lived there for two or more years. There were 69.3% and 72.8% of respondents in programs three and four, respectively, who reported having lived in their neighborhoods between one and five years. Respondents in program one were fairly evenly distributed in terms of length of time spent living in the community.

B-10 Total yearly family income before taxes. Table 37 indicates that the total yearly family income before taxes of all respondents ranged from $15,000.00 to more than $40,000.00 per annum. The mean total income being in excess of $30,000.00.

Program three respondents reported having the highest total yearly family income before taxes. Their incomes ranged from $20,000.00 to more than $40,000.00 with a mean income in excess of $32,000.00. Program two

TABLE 37

Percentage Breakdown of Responses to Question B-10

Total yearly family income before taxes

Respondents	No Response	Income Range	Income Mean
Total (N=42)	4.8%	$15,000.00 to $40,000.00+	$30,000.00+
Program 1 (N=6)	0.0	$15,000.00 to $40,000.00+	$28,000.00+
Program 2 (N=12)	0.0	$15,000.00 to $40,000.00+	$31,000.00+
Program 3 (N=13)	7.7	$20,000.00 to $40,000.00+	$32,000.00+
Program 4 (N=11)	0.0	$15,000.00 to $40,000.00+	$27,000.00

respondents earned a mean income of more than $31,000.00 and their incomes ranged from $15,000.00 to more than $40,000.00. The incomes of program one respondents ranged from $15,000.00 to more than $40,000.00 with a mean income in excess of $28,000.00. Program four respondents reported earning a mean income of more than $27,000.00 and incomes ranged from $15,000.00 to more than $40,000.00.

Participant Observation Data

One central category of data arose from the researcher's notes collected by participant observation: concerns of mothers. The following section will highlight and summarize the information gathered.

Concerns of Mothers

It is interesting to note the number of concerns reported by the program participants overwhelmingly exceeded the number of enjoyable experiences recorded in the category "Positive experiences of motherhood". Our society as a whole tends to focus on negative experiences. One need only to check the evening news on television or read the morning edition of the newspaper to become thoroughly depressed or insensitized to the ill fortunes of society.

For most, childrearing is a new endeavor with many parents having little experience or training in caring for children. This can be simultaneously exciting and worrisome. The decline in the birth rate coupled with the increasing isolation of the nuclear family removes the opportunity for many to observe and experience the intricacies of parenthood prior to bringing a newborn into the world.

Anticipation

For most mothers, being pregnant is not exclusively contented anticipation in smartly styled smocks, nor is it an event that happens upon command. Several mothers reported experiencing anxiety and sadness at having difficulty conceiving while one mother with a two year old child expressed her fears about being able to get pregnant a second time after having had difficulty the first time. Once pregnant, concerns arose such as sickness during pregnancy, being tired, falling during the latter months of pregnancy, being unmarried and a student, and spending a lot of time in the basement in the summer months due to heat. Being overdue, the birth experience, and having twins were among other reported fears. One mother worried about birth defects throughout her pregnancy. She had "seen problems and was quick to imagine problems concerning her child". Another mother expressed extreme guilt concerning her inability to quit smoking during her pregnancy. She worried that her unborn child would be hyperkinetic as a result.

Renewing Equilibrium

For many mothers, the events following the birth of the baby were unexpectedly more difficult than were anticipated. Although long labors and caesarean sections were cited as traumatic, the adjustments to life with a new-born were far more immediate.

> "It was the most difficult year of my life," reported one mother.

Some adjustments were even more difficult when circumstances were out of the ordinary. For example, one mother's baby was born a month early. She had planned to spend the final month of pregnancy at home preparing for life with the baby apart from the workplace. The unexpected early birth coupled with a baby who did not easily breastfeed left her to begin her new career feeling unprepared and anxious. Another infant was immediately placed in an incubator following birth. He had a tube in his head and his hands were tied in front of him so he couldn't dislocate the tube. The mother was only able to put her hand in the incubator to touch the baby for the first week or so. Colicky babies were mentioned by several mothers as being nerve wracking and tiring.

> "The lifestyle change was very difficult; being alone with no adult contacts, the constant crying. You just get over one spell of crying and another begins. The tension builds."

Being up repeatedly during the night made it difficult to get enough sleep to function effectively.

Television commercials and magazine advertisements depicting new mothers neatly groomed and smiling create unrealistic expectations that can lead to depression and unhappiness in the face of reality. One mother summed up the scenario succinctly:

> "Yaa, no bags under their eyes!"

> "Not dressed in the same baggy sweat pants you've been wearing for two weeks."

Once the novelty of having a newborn was over, the new mother had other concerns to deal with. Adjusting to living on one salary, recruiting babysitters, and finding time for themselves and their husbands were frequently mentioned. With the arrival of a new baby, the number of communication exchanges possible amoungst family members is increased and, in addition, family members have new roles to sort out. Husbands and wives may disagree about basic care and disciplining techniques. Division of labor and leisure activities must be redistributed and adjusted. The changes are numerous and complex. For the most part, spur of the moment activities cease.

Selflessness

For most new mothers, the responsibility and demands of newborns are far greater than imagined. Lack of sleep, privacy, and time for one's self were common concerns.

> "My band instructor once told me 'the only time you could ever get any time for yourself was in the bathroom.' I've proved him wrong."

The baby's needs most often take precedence. "Too much so" reported one mother as she confirmed that her husband recently left the family. In less extreme cases, isolation coupled with meeting baby's needs may lead to loss of identity and feelings of low self-esteem.

> "The hardest thing for me was losing myself. There's no time for yourself. You can't take a shower or anything. I lost my identity."

Several mothers confirmed they were occasionally reminded by husbands to talk about topics other than babies. One mother reported feeling guilty when talking to her sister-in-law "because I have nothing of interest to talk about besides children." Another common area of consensus concerned men who often did not understand what it was like to be a mom unless they changed roles for a while.

> "My husband makes me feel guilty about the amount of work I accomplish during the day, so I go to work. Then things are too hectic and get out of control."

> "Nobody mothers women unless it's other mothers who know what it's like."

Being well enough organized and trusting other people to care for their child were two prerequisites for getting away from baby for a time. One mother reported staying at home because "I can't do the things I want to do." Other mothers mentioned feeling guilty leaving home when their child cried or became very distressed. Getting out with a baby is not easy either.

> "It's difficult to be on time. She (baby) takes twice as long to get ready as I do."

Getting up with the baby in the night can be so physically exhausting that there is little energy or desire left to even want to go out. One mother reported knitting in the wee hours of the morning while baby played in his walker. Knitting was the only activity she could manage that did not require a lot of thought or alertness. Some mothers reported sleeping with the baby during the day to make up for lost hours at night. For others, this was not workable.

> "He doesn't sleep long enough. By the time I get a chance to sit down and do some deep breathing and relaxation exercises, he's up again."

When the baby would finally sleep through the night, several moms reported getting up anyway to check to make sure the baby was alright.

The total dependent state of the infant makes it difficult to do anything other than meet the baby's needs first. The needs do not necessarily decrease with time but they do change: dealing with children's fears, illnesses, nutritional needs, teething problems, toilet training, and temper tantrums keep mothers busy.

Everyone's an Expert

Most people tend to be an expert when it comes to offering opinions on parenting. They offer helpful hints and differing philosophies that fuel the confusion and uncertainty for new parents.

> "I worry about what they (other people) are thinking about the way I deal with my child."

One mother mentioned she worried other people were critical of her parenting methods. She was especially worried about going home for Christmas as she thought her father would not agree with her continuing to breastfeed her child. She also thought her family might think she is spoiling the baby by picking her up so often. A third mother worried she might spoil her child and said she had a difficult time knowing what to do when the baby whimpered and seemed to want to be held. One mother reported her parents were upset with her for wanting to take the baby out for walks in the winter.

> "They were afraid he'd catch pneumonia and die."

Another mother relayed that her child was tired when visiting friends. She stepped on the other babies and ran around the room throwing things and taking toys from the other babies.

> "What are they going to think of me? I'll never be able to face them again."

Well intended pieces of advice often result in lowered self-esteem and confidence levels of new parents (Barber & Skaggs, 1975). First time mothers, in particular, may find it difficult as they often don't know what to expect or what to do and they tend to be more tense and anxious with the baby in their attempts to be the "perfect parent".

> "The baby is changing so quickly. What works one

day does not necessarily work again. It's difficult to establish a routine."

Books and relevant parenting literature are often just as confusing. At times the ideas and guidelines presented are rigid and conflicting. "Our baby doesn't seem to fit," one mother reported while another stated, "I just found books with similar ideas to mine and I just read those parts over and over again."

The economic climate of today's society makes it very difficult for mothers to remain at home with their babies. Large mortgages and increasing costs of living are resulting in mothers having to help support their families during the first year of baby's life. This situation tends to add to the stresses of being a parent. Reliable and quality child-care services are scarce (Gallagher-Ross, 1978). Mothers must contend with this fact in addition to the tremendous guilt resulting from leaving baby in someone else's care.

"I'd like to stay at home but it's not possible."

"It's hard to find a babysitter willing to come in."

> "I would hate to get him (baby) out of bed so early in the morning."

> "When you have a full time job and a half time job and a baby, you're really in trouble."

Other stresses mentioned adding to parental concerns were television, advertising, consumer products, and consumer establishments. One mother expressed annoyance that television is too often used as a babysitter.

> "It's so convenient. You can plunk your child in front of the T.V. in the morning and have time to fix your hair, and put on your makeup."

Others expressed anger concerning advertisements and television commercials and maintained that most commercials mislead the public. For example, the nutritious foods surrounding cereals are used to make people think that all cereals are nutritious.

Commercial products must also be carefully selected and some can be potentially dangerous to the health of children. One mother placed her child's soother though a safety gauge and discovered that it did not meet safety standards.

"Good gracious! My heart," she exclaimed.

Taking children into restaurants and other public establishments was another area of concern. Such places are usually not designed for children and may create tension and conflict within families. One mother reported arguing with her husband in a restaurant over their screaming child. She indicated she only goes to restaurants like "Smitty's" because people aren't paying a lot of money for their meal and "they can just put up with my screaming child."

Leader's Evaluation

The following section will summarize the information received from the leaders' questionnaires. As there were only four group leaders, the sample was too small to provide categories of data or group consensus; therefore, only the highlights of the information will be provided in a descriptive format.

A-1 Positive effects of the program. All four program leaders indicated that they valued the program because it provided an opportunity to meet other mothers. Gaining information about child care and development was the next most common response. Ending isolation, gaining personal motivation, and providing opportunities for children to meet and play with other children were also mentioned as valuable aspects of the program.

A-2 Concerns about the program. The areas of concern tended to vary as to the leader. One leader wanted to see the program expanded throughout the city and advertised more extensively in maternity wards and health clinics. Another thought the program was not appropriate for single parents and parents with special needs. She felt that special groups were needed for these mothers. Babysitting was also an area of concern for her as she found it difficult to keep reliable babysitters. A third leader believed some of the sessions lacked direction, the speakers were badly spaced, and there were not enough participants in her program. Finally, the fourth leader did not wish to see the program become institutionalized.

> "The informality (although it is structured) is a definite boon to establishing a cohesive group. The program is not a 'teaching' situation, but a learning and growing experience for all, leader included."

A-3 Side effects of the program. Two leaders reported the mothers developed a more positive attitude towards their family as a result of attending the program as the course offered an opportunity for outside contact and interests. The chance to make friends and develop supportive networks were also expressed by two leaders as positive side effects of the program. The motivation to work on personal change, greater support in the community as a result of developing a feeling of belonging and support, and happier children as a result of better informed mothers and being able to play with other children were other reported effects. One leader did not respond to this question.

A-4 Suggested changes for the program. Two of the program leaders expressed a need for more leaders and more groups. Another leader wished to see the program focus more specifically on a younger age group of children (18 months and under). More organization, advanced planning for speakers, and more focus on personal motivation and goal setting were also mentioned. One leader did not respond to this question.

A-5 Rating the program. On a scale of one to five, two group leaders rated the program as good, one leader rated it as excellent, and the fourth leader thought the program was poor.

A-6 Responsiveness of the group. Two group leaders rated their groups as "very responsive". One leader commented the majority of the participants in her group were professional while the second leader mentioned her group was composed of motivated individuals from a middle-class background who were fairly well educated. A third leader rated her group as average in responsiveness. She found the group "somewhat disappointing in terms of the amount of information shared and felt this might be attributed to the fact the personal backgrounds of individuals ranged widely, (for example, some were professionals and some had never worked which led to extremes in opinions). The fourth leader rated her group as difficult to motivate. In the beginning, many registered participants did not show up. Then, each week there seemed to be different sets of group members attending this program which resulted in a lack of program continuity.

A-7 Rating the information provided. All four leaders consistently rated items 15 and 16 as good or excellent: (15) Knowing that other people share some of your feelings, and (16) Understanding about isolation and the importance of making connections with people. The four leaders consistently rated items 5 and 11 as fair or poor: (5) Understanding the importance of being physically fit, and (6) How to choose and use babysitters and day care. Two program leaders tended to rate the majority of the items as good or excellent. One leader rated most items as good or fair whereas the fourth leader rated the majority of items as fair or poor.

A-8 Reasons for attending a Mom's Group. All four program leaders were in agreement that most mothers attended the program to hear what being a mom was like for others. They also consistently reported that several or most mothers attended the program to find out what resources exist for parents and children and to get practical, relevant information and ideas about raising children. Leaders from two programs rated all statements as reasons (see Appendix B) why several or most people attended the program. Two program leaders rated the majority of items as reasons why several or most people attend, however, one leader thought few people attended to meet new friends or to get out of the house. She reported that several mothers join such a program because of personal motivation and to restructure their time and/or life. Another leader believed few mothers joined to learn how to be a better parent, to learn more about child care and development, to share positive experiences and concerns about being a parent, or to let their children meet and play with other children.

A-9 What people gain from attending the program. Program leaders from two programs reported several or most people benefited from all of the goals as listed. A third leader reported several or most people benefited from a majority of the goals as listed, however, she thought that only a few participants benefited from the goal "to know they can learn to be a good parent" and she did not express an opinion concerning the goal "to be more motivated to develop supportive social contacts". The fourth leader reported that few of the program participants benefited from a majority of the goals as listed. She thought none of the participants seemed to be more motivated to use available community resources but several participants seemed to be better adjusted and more comfortable in their role as a parent. Another reason given for benefiting from such a program was "to share positive parenting interactions" (as opposed to negative advice and opinions) leading to positive "modelling".

A-10 Helpful information and support for parents in the future. There was no common element of consensus in the suggestions reported by the four group leaders. The suggestions provided were as follows:

1. more counselling on the husband/wife relationship
2. an informal structure parents can refer to once they have participated in this kind of group (for example, a drop-in centre)
3. people for personal support
4. parent education about toddlers
5. parent education about "Growing as a family" ("having a child is an overwhelming change in lifestyle - plan to make it positive")
6. ongoing information on child development and learning theories

A-11 Helpful information and support for effective future leadership. Two leaders reported workshops for group leaders would be helpful and one leader thought meetings for leaders would provide additional support and advice. A third leader believed there should be more awareness of community facilities for parents and more awareness of child development. One leader did not respond to this question.

CHAPTER VII

SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

This chapter contains a summary of the inquiry, the conclusions reached, and recommendations for future research and programming.

The Problem

The importance of parents as the first and most influential educators in a child's life is currently being emphasized (Bronfenbrenner, 1975; White, 1975). Post-partum support groups have recently emerged to assist new parents cope with the reality of parenthood. Many of these groups were based on the belief the first three years of a child's life are crucial in terms of optimum growth and development.

Post-partum support groups commonly employ group discussion techniques (Croake & Glover, 1977) which are designed to provide guided leadership, maximum participation, and personal involvement based on the interests and needs common to an individual group of parents. Parents learn from one another (Auerbach, 1968; Hereford, 1963) and may also benefit by having the opportunity to initiate and develop informal kinds of social support networks. It is increasingly evident (Burke & Weir, 1981; Caplan & Killilea, 1976; Powell, 1980) supportive interactions serve to protect an individual from physiological and emotional illnesses commonly associated with life stress. Supportive social networks may provide emotional encouragement and guidance to enable stressed individuals to more actively seek solutions to problems.

The purpose of this study was to investigate the nature of a Mother's Support Group Program in Edmonton, Alberta. The program was comprised of four community based programs developed to create a network of mutual support for new parents by providing them with an opportunity to meet other parents, discuss common concerns, and become involved with educational speakers. The ultimate goal of the program was to enhance the experience of parenthood. The study was intended to be exploratory in nature using both quantitative and qualitative data collection techniques.

Two questionnaires were developed by the author to obtain the views of the program participants and group leaders. Fourty-two program participants and four group leaders completed the questionnaires following the conclusion of the twelve week program. In addition, the author visited each of the four individual programs a total of four times for the purpose of collecting data using participant observation techniques. As a participant observer, the researcher attempted to see the world from the point of view of each mother in the program without affecting her view (Bogdan, 1972; Bollens & Marshall, 1973). A time-out method of participant observation was employed and the information was used to complement the data received from the questionnaires.

Findings

The findings, as they relate to each of the research questions, are reported below.

1. The nature of the Mom's Group Program. The results of this study suggest the Mom's Group Program was a beneficial experience for the participants. A clear majority of all program participants rated their group leader as good or excellent in the following areas:

knowledge of material presented, leadership style and techniques, ability to create a comfortable atmosphere, and overall competency. It would appear the informal discussion methods employed by the group leaders were effective in providing the participants with guided leadership, maximum participation, and personal involvement based on the interests and needs common to the individual group of parents.

The mothers who attended the course tended to be from middle-class economic backgrounds and were well educated. Through participation, they gained an opportunity for positive social contact with others in similar situations. They received practical, relevant information concerning parenting and were provided with a supportive network of individuals to relate to during a time of transition. Thus, the main objectives of the program were met.

2. How participants felt about the program. The findings support the conclusion the Mom's Group was a beneficial program for the participants. The majority of respondents indicated they valued the program as a social outing, found the program to be a supportive activity, and gained information about child development and

raising children. These reported benefits were consistent with the most commonly stated reasons for initially joining the Mom's Group: "to get out of the house", "to hear speakers and have contact with adults", and "to let my child meet and play with other children". The findings were also consistent with the three most important needs mothers reported having following the birth of their babies: time for self, support, and social outlets. The most commonly reported expectations fulfilled as a result of attending the program related to receiving practical information about raising children and becoming more confident in the role as a parent.

When asked to rate the helpfulness of the program, 73.8% of the respondents rated the program as good or excellent, 92.9% confirmed they would recommend the program to others, and 73.8% indicated they felt more comfortable in their role as a parent as a result of attending the program. There were 95.2% who indicated they discussed what happened in the Mom's Group with their husbands or male partners, 63.3% said they would sometimes discuss what happened in the program with relatives or friends, and 28.6% said they often shared their experiences with friends or relatives. These figures suggest the program participants may have extended information and support received in the program to indiviudals not enrolled in the program. Thus, the program may have had a greater impact on the community than originally anticipated.

In comparing the information received in the Mom's Group Program with other sources, a clear majority of respondents reported books and magazines, doctor, friends, nurse, and relatives to be "about the same as the Mom's Group" or "more helpful than the Mom's Group". The people most commonly turned to for help in making decisions were husbands or male partners (95.2%), friends (40.5%), and others such as doctors or community agencies (28.6%).

The program participants were also asked to rate the information provided during the course of the program. The following topics were rated by a clear majority of all participants as good or excellent: knowing that other parents share some of your feelings; feeling that being a parent is an important job; suggestions of books to read for more information; understanding your own needs and taking care of them; understanding about isolation and the importance of making connections with people; learning about other ways of dealing with your children and social environment; and learning about ways of being a better parent.

3. How the leaders perceived the program. All four program leaders (who were all mothers themselves) indicated they valued the program because it provided an opportunity to meet other mothers. This finding was consistent with the program benefit most commonly valued by the program participants. Gaining information about child care and development, ending isolation, increasing personal motivation, and a social outing for children were also mentioned as positive effects of the program. The most commonly mentioned side effects of the program were: more positive attitudes towards the family as a result of having outside contacts and interests; and the opportunity to make friends and develop supportive social networks.

When asked to report their general opinions about their programs, two leaders rated their programs as good, one leader believed hers to be excellent, and the fourth leader thought hers was poor. This finding was consistent with how the leaders rated the responsiveness of their groups: two leaders found their groups to be very responsive, one rated her group as average in responsiveness, and the fourth leader rated her group as difficult to motivate. Throughout the findings, one program consistently received lower opinions from the program leader as well as from the participants. This program seemed to experience difficulties from the beginning with low enrolments, poor attendance, difficulties scheduling speakers, child-care problems, and inconsistent leadership due to the leader being on holidays for a month.

4. Recommendations of the program participants. The areas most commonly mentioned as being in need of change for future programs were child-care services and age span of the children in the program. Respondents reported the need for additional, better qualified baby sitters and the need for more space in the child-care rooms. Also mentioned was the need to limit the age span of the children in the program. Participants felt that mothers with toddlers and mothers with newborns had very different immediate concerns and areas of interest. They felt the program would be improved by separating these two groups. In terms of content changes, the most commonly mentioned recommendation was to provide more time in the program for learning about existing resources available for parents and their children.

In comparing the four community programs, program four participants reported significantly fewer concerns and recommendations for program changes. The majority of mothers in this program were first time mothers with infants under one year of age and they chose to care for their own infants during the program sessions. Thus the child-care and age span concerns commonly mentioned by the total sample were not noticeable concerns for the participants in program four.

In regard to future information and support needs, parents most commonly reported needing more information about child development and raising children. The next most common responses were more programs for mothers, more contact with other mothers, more programs for children, and more contact with others with children. These reported future needs were consistent with the needs identified by mothers following the birth of their babies and subscribe to the concept of Support Groups for Parents as helpful in assisting parents in the task of rearing children.

5. Recommendations of the program leaders. In regard to the program, the leaders most commonly reported the need to expand the program to include more community

groups and more leaders. One leader believed there was a need for special groups (such as single mothers or teenage mothers) while another thought the program should focus on a younger age group of children (for example, under one year of age). The need for better advertising to promote the program and more content focus on personal motivation and goal setting were also mentioned. One leader emphasized the need to maintain the informality of the program process as she believed it to be instrumental in establishing a cohesive group. "The program is not a 'teaching situation', but a learning and growing experience for all, leader included".

There was no common element of leader consensus in reporting the future information and support needs of parents. Ongoing parent education (for example, child development and learning theories, growing as a family, the toddler) and informal support structures (for example, marital relationship counselling, parent support people, drop-in centres) were mentioned. These findings were consistent with the recommendations provided by the program participants.

The future information and support needs of leaders mentioned by the program leaders were workshops, meetings for leaders, more awareness of child development, and more awareness of community resources for parents.

Implications and Conclusions

The implications and conclusions of the inquiry are presented in the following section.

The Mom's Group Program

The findings of the inquiry indicate the mothers valued the assistance offered by the Mom's Group Program. Many participants confirmed they experienced a life change situation that was disorienting and stressful following the birth of their babies. Social isolation and loss of self-esteem were commonly reported concerns. The program provided participants with a social outing that was supportive, informative, and helped them to feel more comfortable in their role as parents. Auerbach (1968) and Hereford (1963) suggest that the primary approach to the healthy adjustment of children and the prevention of deviant development is to assist the parents. Thus, the findings suggest both mothers and children benefited from participating in this program.

Supportive Program Elements

It was difficult to isolate and evaluate those elements of the program which provided the most helpful experiences for new mothers. Each program participant attended the program to meet her own unique needs and reacted individually to the program elements and environmental situation. However, an examination of the data indicates the following program elements provided support for new mothers.

Social contact. The program provided participants with an opportunity for a social outing. Isolation tends to leave new parents with little or no societal support or assistance and there is increasing evidence that isolation contributes to loneliness and low sense of self-esteem. Human contacts can assist parents by providing them with hope and motivation to deal with their concerns in more positive ways. The Mom's Group Program appeared to help the mothers overcome feelings of isolation by providing an opportunity for socialization with resource people and other new mothers.

Motherhood in reality. Some of the more harmful effects of the myths of motherhood may have been dispelled. The information provided throughout the program along with the opportunity to share concerns with parents in similar situations, lends support to a more realistic view of parenting as a developmental learning process. The understanding that parenthood is not totally instinctual and there are skills and information that can be learned is comforting in itself. The information provided in this Mom's Group Program helped mothers to develop more realistic expectations and goals concerning themselves, their children, and their family members.

Mutual support. Few parents are prepared for the changes that come with the arrival of a newborn. Coming to terms with the vast responsibility of parenthood and the accompanying changes in lifestyle can be overwhelming. The Mom's Group provided the support of mutually concerned individuals in similar situations. The program leaders helped the mothers deal with their concerns in healthy ways. In addition, they encouraged the mothers to work towards developing effective solutions to their problems.

Information. The program provided information concerning the physical and emotional aspects of motherhood coupled with sound information on child development. The program leaders disseminated relevant and current information concerning parenting in an atmosphere designed to stimulate discussion and understanding of the information presented. This type of program may provide parents with more realistic expectations about raising children and family living. Healthier parent-child interactions may result, along with renewed enthusiasm and confidence to meet the challenges of growing together as a family.

Community support. Finally, the program provided support for mothers and their families in a community context. The community based programs provided mothers the option of continuing the supportive relationships formed with other mothers following the termination of the program. In addition, the mothers may be able to extend support and information to friends and family members who did not take part in the program. Life with a newborn becomes easier with understanding and supportive networks of family and friends. Ideally, mothers need to be able to provide one another with recognition and support as valuable contributors to society. The Mom's Group Program emphasized that social networking was essential to the well being of families. The program served to initiate and encourage the development of informal support networks. The mothers were provided with information about available community resources and were encouraged to discover alternative ways of effectively dealing with their children and social environment.

Future Programming

The participant observation techniques employed in this study provided valuable complementary information about the Mom's Group Program that could not have been gathered or inferred from the questionnaires. As a participant observer, the researcher discovered each community program was unique as was each of the program sessions. Thus, it seems unrealistic for a "packaged" program to effectively meet the needs and expectations of parents in various Parent Support Group Programs. An eclectic approach would be more appropriate and could include a range of resources and options for dealing with the unique needs and concerns of the participants.

Informal, personal networks are an important and inexpensive resource available to families. The Mother's Support Group Program concept was designed to strengthen and supplement the existing informal support networks available to families. The program appears to be an effective, cost efficient means for providing preparation and assistance for parenthood.

In conclusion, further evaluation is required to investigate the effects of parent support groups and to determine the most desirable methods for effectively educating parents. However, it is clear that the Mom's Group Program provided a beneficial experience for the participants.

Recommendations

The section that follows will provide recommendations for future research studies in addition to suggestions which are intended to be helpful to the Mom's Group Program.

Future Research

The author recommends that future researchers consider studying the program and philosophy of other parent support group programs. A comparison could be made of different programs to determine if there are successful elements common to various programs.

In terms of attitudinal changes and skill development, changes which occur in individuals should be studied. Both short term and long term changes could be measured. Are the changes which occur as a result of attending the Mom's Group Program lasting or only short term? It is the author's belief that long term changes require repeated exposures to information and opportunities to practice the skills learned.

Further research using participant observation methods should be used. One program could be studied and followed from the beginning of the program to the end. In this way perhaps more insight would be available concerning the changes and benefits acquired by individual program participants. A post study to determine if support networks continue beyond the length of the program would also provide interesting insights into the benefits of the program.

Mom's Group Program

The author makes the following recommendations which may be beneficial to the Mom's Group Program in Edmonton:

1. The roles and responsibilities of the group leaders and program coordinator should be well defined to eliminate confusion concerning the requirements of the positions. In addition, the long and short term goals of the program also need to be well defined and understood by all group leaders.

2. The program leaders need to define and clarify long and short term objectives throughout the course. This will supplement personal and group goals of the participants and assist in developing the feeling of achievement and satisfaction gained by individuals and group leaders. This may further enhance the positive self-concept of participants and leaders.

3. An ongoing training and support system should be developed for group leaders to assist them in developing group leadership and process skills and to help them in dealing effectively with immediate concerns. This will promote and enhance the skills and confidence levels of the leaders.

4. A training program for child-care workers should be developed to assist them in effectively caring for the children. If this recommendation is not feasible, then a home-based program in which mothers care for their own infants should be considered.

Concluding Statement

This study suggests although there is a need for continued research relating to the use of Mother's Support Group Programs, the program approach appears to be an effective means of assisting parents in raising children. The findings indicate the program participants gained from having positive social contact with each other and from receiving practical, relevant information concerning parenting. In addition, the program provided a supportive network of individuals to relate to during a time of transition. The data indicates the mothers felt more comfortable in their role as a parent and suggests both mothers and children benefited as a result of attending the program. The Mother's Support Group concept as a means of parent education deserves attention.

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APPENDIX A

RAISING CHILDREN
ALBERTA PARENTS
SHARE THEIR VIEWS

Please take a few minutes to answer the questions in this booklet, put it in the return envelop (you do not need to add postage), and mail it to the program evaluator at 11763 - 37A Avenue, Edmonton, Alberta, T6J 0K1.

All information will be confidential.

THANK YOU FOR YOUR HELP!

HS141K

PART A: Evaluation of the "Mom's Group"

In the first part of this questionnaire, we would like to ask you some questions about the Mom's Group.

Your opinions will help us to learn if the Mom's Group is a helpful program for parents.

Please remember that all answers are completely confidential.

For questions A-1 to A-3, please write your answers in the boxes provided.

A-1 Please list up to three (if any) major positive effects the Mom's Group has had for you.

A-2 Are there any areas of concern about the Mom's Group program?

A-3 What changes (if any) would you suggest be made in the Mom's Group program in the immediate future?

A-4 How would you rate the helpfulness of the Mom's Group to you as a parent? (circle the number which best tells how you feel.)

1	2	3	4	5
No Opinion	Poor	Fair	Good	Excellent

A-5 Do you think that meeting with the Mom's Group once a week was: (Circle the number next to the answer that best describes your opinion.)

1 TOO OFTEN

2 OFTEN ENOUGH

3 NOT OFTEN ENOUGH

A-6 Do you think that meeting with the Mom's Group for 12 weeks was:

1 TOO OFTEN

2 OFTEN ENOUGH

3 NOT OFTEN ENOUGH

A-7 How did you find out about this program?

1 FROM A NEWSPAPER ADVERTISEMENT.

2 FROM A FRIEND OR RELATIVE.

3 AT A HEALTH UNIT CLINIC OR PUBLIC HEALTH NURSE.

4 OTHER, SPECIFY ______________________________

A-8 Would you recommend the Mom's Group program to others?

1 YES
2 NO

A-9 Please rate the group leader. (Circle one answer on each line.)

	No Opinion	Poor	Fair	Good	Excellent
1 Knowledge of material presented.	1	2	3	4	5
2 Leadership style and techniques.	1	2	3	4	5
3 Ability to create a comfortable atmosphere	1	2	3	4	5
4 Overall competency.	1	2	3	4	5

A-10 Did you read Smiles and Tears? (Circle the number next to choice that best describes your reading habits.)

1 YES, I READ IT CAREFULLY, MORE THAN ONCE.

2 YES, I READ IT CAREFULLY, ONCE.

3 YES, I READ IT QUICKLY, ONCE.

4 I READ SOME PARTS OF IT.

5 I DID NOT READ IT. (If you did not read Smiles and Tears, please skip the next question.)

A-11 How would you rate the helpfulness of Smiles and Tears to you as a parent? (Circle the number which best describes your opinion.)

1	2	3	4	5
No Opinion	Poor	Fair	Good	Excellent

Comments: ______________________________

A-12 Did you use the child-care services provided by the Mom's Group?

1 YES, FREQUENTLY.
2 YES, SOMETIMES.
3 NO (If you never used the child-care services please skip the next question.)

A-13 How would you rate the helpfulness of the child-care services to you as a parent? (Circle the number which best describes your opinion.)

1	2	3	4	5
No Opinion	Poor	Fair	Good	Excellent

Comments:________________________________

A-14 How does the information in the Mom's Group compare with the information you get from other sources? Here is a list of other sources of information. For each source, please tell us if it is more helpful, less helpful, or about the same as the Mom's Group. (Circle one answer on each line.)

	NEVER USE SO NO COMPARISON CAN BE MADE	LESS HELPFUL THAN MOM'S GROUP	MORE HELPFUL THAN MOM'S GROUP	ABOUT THE SAME AS MOM'S GROUP
1 RELATIVES	1	2	3	4
2 FRIENDS	1	2	3	4
3 NEIGHBOURS	1	2	3	4
4 DOCTOR	1	2	3	4
5 COMMUNITY HEALTH NURSE	1	2	3	4
6 COUNSELLOR OR SOCIAL WORKER	1	2	3	4
7 BOOKS AND MAGAZINES	1	2	3	4
8 PARENTING COURSE	1	2	3	4
9 TELEVISION AND RADIO	1	2	3	4

A-15 Do you ever talk about what happens in the Mom's Group with someone else in your household? (Circle one or more choices.)

1 NO ONE
2 MY CHILD(REN)
3 MY HUSBAND (OR MAN FRIEND)
4 OTHER ADULT LIVING IN MY HOME

A-16 Do you ever talk about what happens in the Mom's Group with friends or relatives? (Circle the number next to the answer that best describes your opinion.)

1 NO
2 YES, RARELY
3 YES, SOMETIMES
4 YES, OFTEN

A-17 To whom do you turn to for help in making decisions concerning your child(ren) and yourself? (Circle one or more choices.)

1 NO ONE
2 HUSBAND OR MALE PARTNER
3 MY OWN PARENTS
4 OTHER RELATIVES
5 FRIENDS
6 OTHERS (e.g., professional, agency, community resource)

A-18 What are the three most important needs (if any) you have experienced since the birth of the baby? (Please write your answers in the boxes provided.)

A-19 What are the three most important things (if any) you have learned about the development and care of your child(ren) as a result of attending the Mom's Group Program?

A-20 Does the Mom's Group help you feel more comfortable in your role as a parent?

1 YES
2 NO

A-21 The Mom's Group provides information on a number of topics. Here is a list of some general topic areas covered in the program. Please tell us your opinion of the information in each area provided in the Mom's Group. (Circle one answer on each line.)

		Excellent	Good	Fair	Poor	No Opinion
1	Parents' relationship with each other	1	2	3	4	5
2	Understanding your own needs and taking care of them	1	2	3	4	5
3	Feeling that being a parent is an important job	1	2	3	4	5
4	Learning about ways of being a better parent	1	2	3	4	5
5	Understanding the importance of being physically fit	1	2	3	4	5

		Excellent	Good	Fair	Poor	No Opinion
6	Learning about a child's physical emotional, social and mental development	1	2	3	4	5
7	Understanding how children learn	1	2	3	4	5
8	How and when to discipline children	1	2	3	4	5
9	How to recognize when to go for outside help (doctor, counsellors, etc.)	1	2	3	4	5
10	How and what to feed children	1	2	3	4	5
11	How to choose and use babysitters and day care	1	2	3	4	5
12	How to handle special problems (such as crying, teething, and toilet training	1	2	3	4	5
13	Suggestions of books to read for more information	1	2	3	4	5
14	Suggestions of community resources to seek for more information	1	2	3	4	5
15	Knowing that other parents share some of your feelings	1	2	3	4	5
16	Understanding about isolation and the importance of making connections with people	1	2	3	4	5
17	Learning about other ways of dealing with your children and social environment	1	2	3	4	5

A-22 Listed below are reasons some people have given for attending a Mom's Group. When you decided to take this course, what did you hope to gain from coming to the Mom's Group. Circle the number(s) next to the answer(s) (if any) that best describe why you joined the Mom's Group.

1 TO MEET NEW FRIENDS

2 TO GET OUT OF THE HOUSE

3 TO HEAR WHAT BEING A MOM IS LIKE FOR OTHERS

4 TO LEARN HOW TO BE A BETTER PARENT

5 TO LEARN MORE ABOUT CHILD CARE AND DEVELOPMENT

6 TO HEAR SPEAKERS AND HAVE CONTACT WITH ADULTS

7 TO FIND OUT WHAT RESOURCES EXIST FOR PARENTS AND CHILDREN

8 TO SHARE POSITIVE EXPERIENCES AND CONCERNS ABOUT BEING A PARENT

9 TO GET PRACTICAL, RELEVANT INFORMATION AND IDEAS ABOUT RAISING CHILDREN

10 TO LET MY CHILD MEET AND PLAY WITH OTHER CHILDREN

11 OTHER REASONS - PLEASE SPECIFY: ____________________
____
____

A-23 How well did this program meet your expectations? (Circle the number(s) next to the answer(s) (if any) that best describes what you believe you gained from attending the Mom's Group.)

1 I MADE NEW FRIENDS

2 I AM BETTER ADJUSTED AND MORE COMFORTABLE IN MY ROLE AS A PARENT

3 I AM MORE UNDERSTANDING AND TOLERANT OF THE NEEDS OF MY CHILD(REN) AND MY PARTNER

4 I AM MORE UNDERSTANDING OF MY OWN NEEDS AND BETTER ABLE TO TAKE CARE OF MY OWN NEEDS

5 I KNOW I CAN LEARN TO BE A GOOD PARENT

6 I GAINED PRACTICAL, RELEVANT INFORMATION AND IDEAS ABOUT RAISING CHILDREN

7 I AM MORE MOTIVATED TO USE AVAILABLE COMMUNITY RESOURCES (e.g., agencies, professionals, courses, etc.)

8 I AM MORE CONFIDENT THAT I CAN PROVIDE MY CHILD(REN) WITH A HAPPY, HEALTHY SAFE AND CHALLENGING ENVIRONMENT

9 I AM MORE MOTIVATED TO DEVELOP SUPPORTIVE SOCIAL CONTACTS

10 I AM MORE OPTIMISTIC ABOUT RAISING CHILDREN AND FAMILY LIFE

11 OTHER REASONS - PLEASE SPECIFY: ____________________

____

____

A-24 What kinds of information and support in your role as a parent (if any) would be helpful to you in the future? (Please write your answers in the boxes below.)

PART B: General Information

In this last section, we would like to ask some questions about yourself to help us better understand the Mom's Group program.

B-1 How many sessions of the Mom's Group program did you attend? (Circle the number next to your answer.)

1 10 - 12 SESSIONS

2 7 - 9 SESSIONS

3 4 - 6 SESSIONS

4 1 - 3 SESSIONS

B-2 Have you attended a course like the Mom's Group before?

1 YES, ONE OTHER PROGRAM

2 YES, TWO OR MORE PROGRAMS

3 NO

B-3 What is your present role? (Circle one or more choices.)

1 HOMEMAKER

2 VOLUNTEER WORKER

3 PART-TIME STUDENT

4 FULL-TIME STUDENT
EMPLOYED PART-TIME

6 EMPLOYED FULL-TIME

7 OTHER________________________________

B-4 How many children are you now raising in your home? (Circle the number of your answer.)

1 ONE CHILD
2 TWO CHILDREN
3 THREE CHILDREN
4 FOUR OR MORE CHILDREN

B-5 How many children are you now raising in your home that are under three years of age? (Circle the number of your answer.)

1 ONE CHILD

2 TWO CHILDREN

3 THREE OR MORE CHILDREN

In the next two questions, we are asking for information about you and the most important person you live with who helps you raise your children. These questions will refer to whoever that is (your husband, male friend). If you do not have an important "other person" living with you, just fill in the information for yourself only.

B-6 How old are you and the other person (Please write in your ages.)

YOURSELF:____________________YEARS OLD

THE OTHER PERSON____________YEARS OLD

B-7 What is the highest level of education that yourself and the other person have completed? (Circle the number of your answer for yourself and the other person.)

	YOURSELF	OTHER PERSON
NO FORMAL EDUCATION	1	1
LESS THAN GRADE 8	2	2
GRADE 8	3	3
SOME HIGH SCHOOL	4	4
COMPLETED HIGH SCHOOL	5	5
SOME UNIVERSITY OR COLLEGE	6	6
COLLEGE DIPLOMA	7	7
UNIVERSITY DEGREE	8	8
SOME GRADUATE WORK	9	9
A GRADUATE DEGREE	10	10

B-8 Are you a home owner?

1 YES

2 NO

B-9 How long have you lived in your present community? (Circle the number of your answer.)

1 MORE THAN 5 YEARS

2 2 - 5 YEARS

3 1 - 2 YEARS

4 LESS THAN ONE YEAR

B-10 Which of the following best describes your total yearly family income before taxes? (Circle the number of your answer.)

1 LESS THAN $10,000 A YEAR

2 $10,000 - $14,999 A YEAR

3 $15,000 - $19,999 A YEAR

4 $20,000 - $24,999 A YEAR

5 $25,000 - $29,999 A YEAR

6 $30,000 - $34,999 A YEAR

7 $35,000 - $40,000 A YEAR

8 MORE THAN $40,000 A YEAR

IF YOU HAVE ANY ADDITIONAL COMMENTS ABOUT INFORMATION AND SUPPORT NEEDS OF PARENTS IN EDMONTON, OR IF THERE IS ANYTHING ELSE YOU WOULD LIKE TO TELL US, PLEASE USE THIS SPACE TO WRITE YOUR OPINIONS AND COMMENTS.

APPENDIX B

RAISING CHILDREN
ALBERTA PARENTS
SHARE THEIR VIEWS

Please take a few minutes to answer the questions in this booklet, put it in the return envelop (you do not need to add postage), and mail it to the program evaluator at 11763 - 37A Avenue, Edmonton, Alberta, T6J OK1.

All information will be confidential.

THANK YOU FOR YOUR HELP!

HS141K

Mother's Support Group Program **Leader's Evaluation**

We would like to ask you some questions about the Mom's Group program. Your opinions will help us to learn if the Mom's Group is a helpful program for parents.

For questions A-1 to A-4, please write your answers in the boxes provided.

A-1 Please list up to three (if any) major positive effects of this Mom's Group program.

A-2 Are there any areas of concern about the Mom's Group program?

A-3 Please list up to three (if any) side effects of this Mom's Group program in the group, in the family, in the community or elsewhere.

A-4 What changes (if any) would you suggest be made in the Mom's Group program in the immediate future?

A-5 What is your overall, general opinion of this Mom's Group program? (Circle the number which best tells how you feel.)

1	2	3	4	5
No Opinion	Poor	Fair	Good	Excellent

A-6 In your opinion, how responsive was this group? (Circle the number next to the answer that best describes your opinion.)

1 THE GROUP WAS DIFFICULT TO MOTIVATE
2 THE GROUP WAS AVERAGE
3 THE GROUP WAS VERY RESPONSIVE

If you think this group was different in some way, please explain. ________________________________

____

____

____

A-7 The Mom's Group provides information on a number of topics. Here is a list of some general topic areas covered in the program. Please tell us your opinion of the information in each area provided in the Mom's Group. (Circle one answer on each line.)

		Excellent	Good	Fair	Poor	No Opinion
1	Parents' relationship with each other	1	2	3	4	5
2	Helping parents understand their own needs and how to take care of them	1	2	3	4	5
3	Feeling that being a parent is an important job	1	2	3	4	5
4	Learning about ways of being a better parent	1	2	3	4	5
5	Understanding the importance of being physically fit	1	2	3	4	5
6	Learning about a child's physical emotional, social and mental development	1	2	3	4	5
7	Understanding how children learn	1	2	3	4	5

		Excellent	Good	Fair	Poor	No Opinion
8	How and when to discipline children	1	2	3	4	5
9	How to recognize when to go for outside help (doctor, counsellors, etc.)	1	2	3	4	5
10	How and what to feed children	1	2	3	4	5
11	How to choose and use babysitters and day care	1	2	3	4	5
12	How to handle special problems (such as crying, teething, and toilet training	1	2	3	4	5
13	Suggestions of books to read for more information	1	2	3	4	5
14	Suggestions of community resources to seek for more information	1	2	3	4	5
15	Knowing that other parents share some of your feelings	1	2	3	4	5
16	Understanding about isolation and the importance of making connections with people	1	2	3	4	5
17	Learning about other ways of dealing with your children and social environment	1	2	3	4	5

A-8 Listed below are reasons some people have given for attending a Mom's Group. In your opinion, how many moms attend for each listed reason. (Circle one answer on each line.)

		No Opinion	None	Few	Several	Most
1	TO MEET NEW FRIENDS	1	2	3	4	5
2	TO GET OUT OF THE HOUSE	1	2	3	4	5
3	TO HEAR WHAT BEING A MOM IS LIKE FOR OTHERS	1	2	3	4	5
4	TO LEARN HOW TO BE A BETTER PARENT	1	2	3	4	5
5	TO LEARN MORE ABOUT CHILD CARE AND DEVELOPMENT	1	2	3	4	5
6	TO HEAR SPEAKERS AND HAVE CONTACT WITH ADULTS	1	2	3	4	5
7	TO FIND OUT WHAT RESOURCES EXIST FOR PARENTS AND CHILDREN	1	2	3	4	5
8	TO SHARE POSITIVE EXPERIENCES AND CONCERNS ABOUT BEING A PARENT	1	2	3	4	5
9	TO GET PRACTICAL, RELEVANT INFORMATION AND IDEAS ABOUT RAISING CHILDREN	1	2	3	4	5
10	TO LET MY CHILD MEET AND PLAY WITH OTHER CHILDREN	1	2	3	4	5
11	OTHER REASONS- PLEASE SPECIFY:					
	____________________	1	2	3	4	5
	____________________	1	2	3	4	5
	____________________	1	2	3	4	5

A-9 Listed below are some goals which people may gain from attending a Mom's Group. In your opinion, circle the number which best describes how many moms met these goals within your group. (Circle one answer on each line.)

		No Opinion	None	Few	Several	Most
1	TO MAKE NEW FRIENDS	1	2	3	4	5
2	TO BE BETTER ADJUSTED AND MORE COMFORTABLE IN THEIR ROLE AS A PARENT	1	2	3	4	5
3	TO BE MORE UNDERSTANDING OF THEIR CHILD(REN) AND THEIR PARTNER	1	2	3	4	5
4	TO BE MORE UNDERSTANDING OF THEIR OWN NEEDS AND	1	2	3	4	5
	BETTER ABLE TO TAKE CARE OF THEIR OWN NEEDS	1	2	3	4	5
5	TO KNOW THEY CAN LEARN TO BE A GOOD PARENT	1	2	3	4	5
6	TO GAIN PRACTICAL, RELEVANT INFORMATION AND IDEAS ABOUT RAISING CHILDREN	1	2	3	4	5
7	TO BE MORE MOTIVATED TO USE AVAILABLE COMMUNITY RESOURCES (e.g.,agencies, professionals, courses, etc.)	1	2	3	4	5
8	TO BE MORE CONFIDENT THAT THEY CAN PROVIDE THEIR CHILD(REN) WITH A HAPPY, HEALTHY, SAFE, AND CHALLENGING ENVIRONMENT	1	2	3	4	5
9	TO BE MORE MOTIVATED TO DEVELOP SUPPORTIVE SOCIAL CONTACTS	1	2	3	4	5
10	TO BE MORE OPTIMISTIC ABOUT RAISING CHILDREN AND FAMILY LIFE	1	2	3	4	5

	No Opinion	None	Few	Several	Most
11 OTHER REASONS - PLEASE SPECIFY:					
____________	1	2	3	4	5
____________	1	2	3	4	5
____________	1	2	3	4	5

A-10 What kinds of information and support (if any) would be helpful to parents in the future to assist them in the task of rearing children? (Please write your answers in the boxes below.)

A-11 What kinds of information and support (if any) do you think would assist you to become a more effective group leader in the future?

IF YOU HAVE ANY ADDITIONAL COMMENTS ABOUT INFORMATION AND SUPPORT NEEDS OF PARENTS IN EDMONTON, WE WOULD APPRECIATE IT IF YOU WOULD WRITE THEM ON THE BACK OF THIS QUESTIONNAIRE.

HS141K

APPENDIX C

Glenda Hilsenteger
11763 - 37A Avenue
Edmonton, Alberta
T6J 0K1

Dear Mom's Group Participant:

I am evaluating the Mom's Group Program in Edmonton as part of my Master's Thesis in Early Childhood Education at the University of Alberta. This program is intended to provide information and support to parents to help them in the important task of raising children. I wish to find out your opinion about the Mom's Group Program so that this service for parents can be improved.

I am sending this question booklet to a small number of parents in Edmonton who attended the Mom's Group Program. Your answers will provide a better understanding of the ways parents can best be served. If you attended only a few of the sessions of the Mom's Group Program, your answers are just as important as the answers of parents who attended more frequently. The information you give me will be used to improve the Mom's Group Program, and to help plan other programs for parents.

I would appreciate if you would take the time to fill out the question booklet and return it to me in the stamped envelope provided. Your answers are confidential and will be used only by myself and my program advisors at the University of Alberta. The Parent Resource Unit and the Family Life Education Council are involved with this program, and therefore, are very interested in the results of this study. Please return the completed question booklet at your earliest convenience.

Thank you very much for helping me with this study.

Yours sincerely,

Glenda Hilsenteger
Graduate Student
University of Alberta

GH/bl

APPENDIX D

Glenda Hilsenteger
11763 - 37A Avenue
Edmonton, Alberta
T6J 0K1

February 3, 1982

Dear Mom's Group Participant:

Two weeks ago a questionnaire seeking your opinion about the Mom's Group program was mailed to you. Your name was drawn from a list of mothers who recently attended the Mom's Group program in Edmonton.

If you have already completed and returned it to me, please accept my sincere thanks. If not, please do so today. Because it has only been sent to a small number of Edmonton parents, it is extremely important that yours also be included in the study if the results are to accurately represent the opinions of Edmonton parents.

If by some chance you did not receive the questionnaire, or if it got misplaced, please call me right now, (427-2539) and I will get another one in the mail to you today.

Sincerely,

Glenda Hilsenteger
Graduate Student
University of Alberta

GH/ba

APPENDIX E

Glenda Hilsenteger
11763 - 37A Avenue
Edmonton, Alberta
T6J 0K1

February 17, 1982

Dear Mom's Group Participant:

About a month ago I wrote to you seeking your opinions about the Mom's Group program. As of today I have not yet received your completed questionnaire.

I have undertaken this study because of the belief that parents' opinions should be taken into account in the development of programs to serve parents of young children.

I am writing to you again because of the importance each questionnaire has to the usefulness of this study. You are one of a small number of parents in Edmonton who received the questionnaire. In order that the results of this study truly represent the opinions of Edmonton parents, it is essential that each person in the sample return the questionnaire.

In the event that your questionnaire has been misplaced, a replacement is enclosed.

I greatly appreciate your cooperation.

Cordially,

Glenda Hilsenteger
Graduate Student
University of Alberta

P.S. If you have already sent in your completed questionnaire, it may have crossed this letter in the mail. In that case, I extend my thanks and ask you to please disregard this letter.